









VA -Tribal Health Program (THP) Reimbursement Agreements

August 2017





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Background

The local VA Reimbursement Agreements with the Indian Health Service (IHS) and Tribal Health Programs (THP) pays the IHS and THP health care facilities for direct care services they provide onsite 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 establish access to care collaboration, resource sharing, and care coordination, for our nation's eligible AI/AN Veterans.

In December 2012, VA signed a national 'Reimbursement Agreement' with IHS which promotes improved VA–IHS and Tribal program interactions. The Agreements provide easier access to healthcare within VHA, IHS, or Tribal health care systems, for eligible AI/AN Veterans.





Payment Rates and Fees

SERVICES	BASED ON	APPLICABLE
Inpatient Hospital	 Medicare Inpatient Prospective Patient System (IPPS) 	
Outpatient	IHS All Inclusive Rate published in the Federal Register	
Critical Access Hospital	Established rate as determined by Medicare	Facility must provide the Medicare rate letter to VISN 20 NPC
Ambulatory Surgical	 Medicare rates established 	
Pharmacy (Outpatient)	Actual cost (retail price)	Pharmaceuticals must be in the VA formulary or prior approval has been acquired for Non-VA formulary from the VA pharmacist
Administrative fees will	be applied to the following claims: Paper claims will incur a \$15 fee	





Enrollment and Eligibility Roles and Responsibilities

VHA Office of Community Care (OCC) IHS/THP Reimbursement Agreement Program Team will:

- Ensure all program documentations are consistent with the IHS and THP Reimbursement Agreements
- Coordinate with the IHS and THP, VISN 20 Network Payment Center, and VA medical center staff regarding program operations

VISN 20 Network Payment Center (NPC) will:

- Establish program requirements, staffing, training, and oversight necessary to facilitate the processing and payment of healthcare claims associated with direct care services provided under an approved IHS or THP agreement
- Validate the enrollment and eligibility of AI/AN Veteran prior to claims payment
- Provide customer service to IHS and THP stakeholders related to healthcare claims inquiries

Local VA medical center will:

- Provide AI/AN Veteran enrollment and eligibility information to IHS/THP providers as needed
- Collaborate with the IHS/THP providers by assisting the eligible AI/AN Veteran in enrolling in the VA Healthcare System





Enrollment and Eligibility Roles and Responsibilities

VA Health Eligibility Center (HEC) will:

- Provide VA enrollment and eligibility training to IHS/THP providers and stakeholders
- Provide AI/AN Veteran enrollment and eligibility information to IHS/THP providers/facilities

IHS/THP facilities/providers will:

- Provide Direct Care Services to eligible AI/AN Veterans as specified in the IHS\THP reimbursement agreement
- Ensure that AI/AN Veteran enrollment and eligibility has been verified prior to the submittal of healthcare claims
- Submit healthcare claims in accordance to the IHS/THP reimbursement agreement and applicable regulations
- Assist the eligible AI/AN Veteran in enrolling in the VA Healthcare System and collaborate with the VA in the enrollment process as necessary



Eligibility & Enrollment Requirements

Eligibility and Enrollment Requirements:

Eligible AI/AN Veteran must meet the following qualifying criteria:

- Eligible for services from IHS/THP in accordance with 42 CFR Part 136.
- Enrolled in the VA Healthcare System as a condition to be reimbursed for 'Direct Care Services' provided under 38 CFR § 17.38 the Medical Benefits Package.

Enrollment Exemptions:

Eligible AI/AN Veteran must meet one of the following if he/she is not enrolled or choose not enroll in VA Healthcare System:

- Rated Service Connected (SC) disability at 50 percent or greater
- SC disability will receive services for SC disability
- Discharged or release from active military for a disability incurred or aggravated in the line of duty will receive service for 12-month period following discharge or release.





Enrollment Exception

- If the VA Healthcare enrollment exception is met, then the IHS/THP can submit healthcare claims for the direct care services rendered specific to the exemption (e.g., service connected disability) provided that the proof of VA benefits entailment is provided (e.g., VA benefits grant letter).
- For detailed process on how getting a copy or apply for VA benefits letter, enrolling the AI/AN Veterans in the VA healthcare system, and verifying AI/AN Veterans VA enrollment status refer to the VA-IHS/THP Reimbursement Agreement Enrollment and Eligibility procedure guide (attached).





Enrollment Exception

Where can a Veteran get a copy or apply for VA benefits letter?

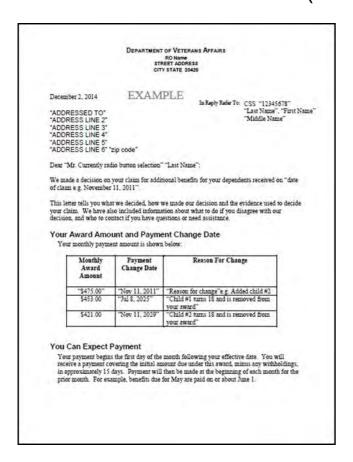
- In person at one of the Veterans Benefits Administration Facilities, location listing and links http://www.va.gov/directory/guide/division.asp?dnum=3
- On-line https://www.ebenefits.va.gov/ebenefits-portal/ebenefits.portal
- For questions call 1-800-827-1000, or go to this link to send VA an e-mail question: www.vba.va.gov/benefits/address.htm.
- Additional information on how to apply for different types of VA benefits http://www.benefits.va.gov/BENEFITS/Applying.asp

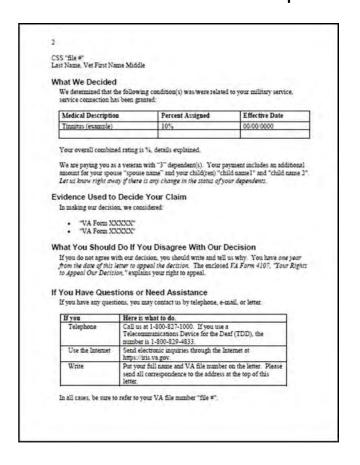




Enrollment Exception

Veteran Benefits Administration (VBA) Benefits Grant Letter Example





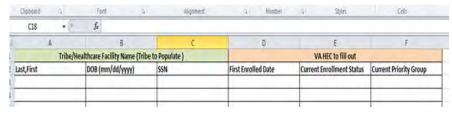




Enrollment Verification

There several ways to verify program AI/AN Veteran enrollment and eligibility in VA healthcare system.

A. IHS/THP can use the IHS Secure Data Transfer Service to request enrollment/eligibility information from VA Health Eligibility Center (HEC) using a Microsoft excel template.

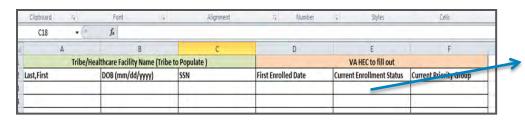


To request access to the IHS Secure Data Transfer Service email Cynthia.Larsen@ihs.gov. Access will be limited to email receipt and reply, contact Cynthia Larsen for instructions.



NOTE: IHS Secure Data Transfer is used to initially acquire a comprehensive listing of all AI/AN Veterans enrollment and eligibility from VA HEC.

Enrollment Verification



VA Health Eligibility Center (HEC) Enrollment and Eligibility Status are defined below:

Status	Definition	
Verified	Veteran status has been verified as enrolled and eligible.	
Pending; Means Test	Veteran enrollment is pending. Financial assessment needs to be	
Required	accomplished to be enrolled in the VA.	
Pending; Eligibility	Veteran's status has not been verified as enrolled or eligible. The	
Status is Unverified	Veteran enrollment application is pending.	
Rejected; Below	Veteran has applied for VA health care after January 17, 2003 and their	
Enrollment Group	salary is above the income thresholds. Therefore, Veteran request for	
Threshold	enrollment into the VA health care program was rejected.	
Not Eligible; Ineligible	Veteran has been determined to be ineligible for VA medical benefits	
Date -	package. The ineligible date and reason for rejection is maintained on	
	file.	
Not Applicable	Veteran is not applicable for enrollment. The Veterans could be eligible	
	for TRICARE, Allied Veteran, or have other status that is not eligible	
	for enrollment in VA health care.	
Not Eligible; Refused	Veteran applied for VA health care but refused to pay copayment.	
to Pay Copay	Therefore, the Veteran is not eligible to be enrolled into the VA	
	Healthcare System	



Enrollment Verification

B. IHS/THP can contact the VA Health Enrollment Center (HEC) directly by telephone if their staff is checking the enrollment/eligibility on less than 5 Veterans.

VA HEC telephone number: 1 (855) 488-8441

Hours of Operation: Monday to Friday, 7:00 AM and 5:30 PM (Eastern Time)

Veteran's name and social security number will be required

C. IHS/THP can contact their local VA medical center to verify the AI/AN Veteran's VA enrollment/eligibility by telephone call.

D. IHS/THP can request documentation or information regarding Veteran's specific VA health care eligibility or/and service connection disability directly from the Veteran (e.g., DD214, VA benefits letter, etc.).

Veteran Enrollment

If AI/AN Veteran is not enrolled in the VA healthcare system. There are four ways a Veteran may enroll with the VA:

Online

Veterans can apply for enrollment online by access this link (https://www.1010ez.med.va.gov/) and follow the online instructions.

By phone

Veterans can apply for enrollment for their benefits or update their information by phone by calling 1-877-222-VETS (8387), Monday through Friday, between the hours of 8:00 AM and 8:00 PM (Eastern Time). A VA representative will have their completed form sent to them for verification and signature.

Veteran Enrollment

By mail

Print the 10-10EZ form (link: http://www.va.gov/vaforms/medical/pdf/vha-10-10EZ-fill.pdf) or 10-10EZR form (link:

https://www.1010ez.med.va.gov/sec/vha/1010ez/Form/1010EZR-fillable.pdf) or call the phone number above to have the form mailed to you. Complete and sign the application, then mail it to:

Health Eligibility Center 2957 Clairmont Road, Suite 200 Atlanta, GA 30329-1647

In person

Veterans can find the nearest VA Medical Center or clinic nearest to them to apply for enrollment or if they are already enrolled, to update their information in person. For VA locations refer to this link: http://www.va.gov/directory/guide/home.asp

Note: A copy of the Veteran's DD-214 is not required , but will expedite the enrollment process.

Healthcare Claims Submission

Electronic Healthcare Claims Submissions:

Must satisfy the criteria established by the <u>Health Insurance Portability Accountability Act of 1996 (HIPAA, Title II)</u>; require the Department of Health and Human Services (HHS) to adopt national standards for electronic health care transactions and national identifiers for providers, health plans, and employers.

- VA is accepting Electronic Data Interchange (EDI) healthcare claims submission for outpatient and inpatient claims (CMS 1500, UB04); except for pharmacy claims.
- ❖ IHS/THP providers or facilities must register or establish connection with the VA's clearinghouse, Change Healthcare (Emdeon), to enable the processing of electronic health care claims. Once registered, be sure to add "THP" in the SBR03 segment of the claim (837) for proper routing through the VA.

Paper Healthcare Claims Submissions:

- \$ 15 fee per paper claims; except pharmacy paper claims
- Use CMS 1500 and UB04 (include sample claims)
- Include all applicable and accurate ICD, CPT, and HCPCS codes

Mail in paper claims to:

VA Portland Health Care System 10N20NPC – IHS/THP 1601 E Fourth Plain Blvd. Vancouver, WA 98661

For Questions AI/AN Veteran claims submission and payments, please contact VISN 20 NPC - Claims Payment Processing Call Center at 1-877-881-7618, Monday through Friday, between 6:05 a.m. and 4:45 p.m., Mountain Standard Time.





Timely Filing and OHI/OLP

Other Health Insurance (OHI)/Other Liable Payers (OLP):

- ❖ Pursuant to 25 U.S.C. 1645(c), the IHS/THP will seek payment from all other liable payers, as permissible by law for the tribes before seeking reimbursement from VA. VA is responsible for the balance remaining, up to amount determined by the agreement reimbursement rates (refer to slide 5 for details), after the other third party payments. (VA is consider a payer of last resort for this agreement.)
- ❖ IHS/THP providers are responsible for submitting healthcare claims to the other health insurance or liable payers prior to billing VA. If applicable, the submitted healthcare claims must have an attached Explanation of Benefits (EOB) from the other health insurance. If the healthcare claims are being submitted to the VA via EDI, mail the EOB to VISN 20 NPC at least 4 days prior to expected EDI claim submission.

Timely Filing:

Healthcare claims for IHS/THP provided direct care services to eligible AI/AN Veterans must be submitted to VA for payment within 12 months from the date of service, otherwise the claims will not be reimbursed by VA.

Pharmacy Claims

❖ VA will reimburse IHS/THP only for pharmaceutical drugs on the formulary used by VA. Requests for reimbursement of pharmaceutical drugs not on the VA formulary will be submitted for approval to the local VAMC Pharmacy in advance of the request for reimbursement.

Here is the link to the VA Formulary listing: http://www.pbm.va.gov/NationalFormulary.asp
Search engine: http://www.pbm.va.gov/apps/VANationalFormulary

VA Criteria for Use for many Non-VA formulary drugs: http://www.pbm.va.gov/PBM/clinicalguidance/criteriaforuse.asp

VA can only accept Pharmacy paper claims due current EDI limitation, the submitting IHS/THP must use CMS 1500 to submit pharmacy claims. The CMS 1500 must contain the following:

- Date of fill
- Pharmacy name
- Drug name (generic name)
- Amount paid by the other health plan or for Pharmacy
- Quantity
- Dr.'s name
- Drug strength
- Retail price

- Number of day's supply
- National Drug Code (NDC)
- Prescription number
- If the drug is a controlled substance, the Drug Enforcement Administration (DEA) number must also be provided.

Pharmacy VA-Non Formulary Request

VA Non-Formulary requests must be submitted to the local VAMC pharmacy for approval. The local VAMC pharmacy will provide IHS/THP the process for submitting the request.

- ❖ Routine request for non-formulary agents are reviewed and the requestor notified of the decision within 96 hours of receipt of a completed non-formulary request.
- Emergency request for non-formulary agents are immediately addressed by individual(s) Identified in local VA medical policy.

Request will be handled according to the VHA Handbook 1108.08 VHA Formulary Management Process and local VAMC policy.

IHS/THP requesting reimbursement for a VA Non-Formulary pharmaceutical must attached the approval documentation with submitted pharmacy claims.





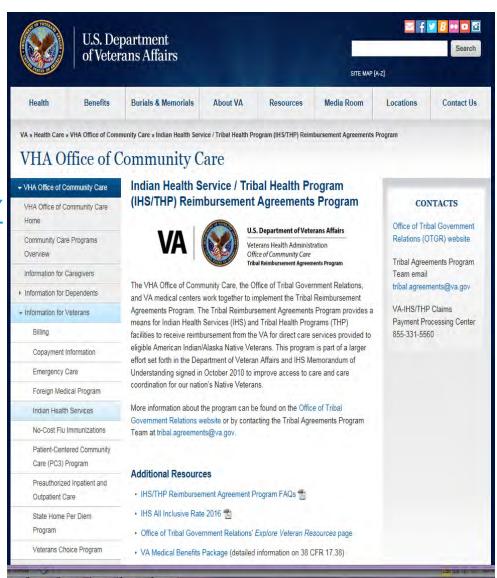
IHS/THP Resources and Contact Information

Information on how to establish agreements, templates, forms and guides about the program are housed at VA Office of Community Care (OCC):

https://www.va.gov/COMMUNITY CARE/programs/veterans/ihs/ind ex.asp

For more information on getting started with Tribal Health Program agreements, send an email to

tribal.agreements@va.gov





References

- 25 U.S.C. § § 1645 & 1645(c) Sharing agreements with Federal agencies
- 38 U.S.C. § § 1705 & 1705 (c)(2) Management of health care: patient enrollment system
- 38 U.S.C. § 8153 Sharing healthcare resource
- 38. U.S.C. § 111 and 38 CFR Part 70; VHA Handbook 1601B.05; Travel Benefits
- 38 CFR § 17.36 Enrollment provision of hospital and outpatient care to veterans
- 38 CFR § 17.37(a)-(c) Enrollment not required provision of hospital and outpatient care to veterans
- 38 CFR § 17.38 Medical benefits package
- 42 CFR § (Part) 136- Indian Health
- 25 U.S.C. 38. U.S.C. § 111 and 38 CFR Part 70; VHA Handbook 1601B.05;
 Travel Benefits
- 1603 Definitions: (12) Indian Health Program, (13) Indians or Indian & (25)
 Tribal Health Program

Questions



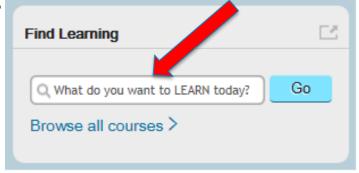




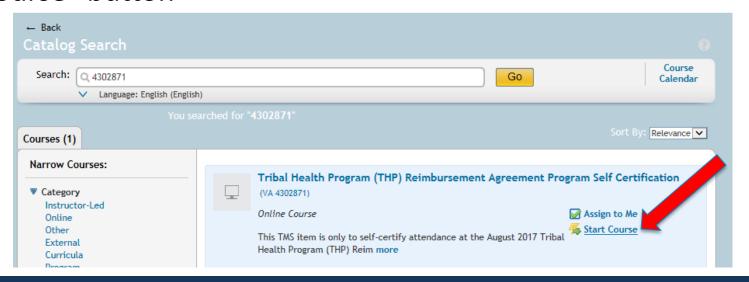
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