

# TRIBAL CONSULTATION

## Indian Health Service (IHS) and Tribal Health Programs (THP) Reimbursement Agreement

### Care Coordination Approach

---

August 25, 2020



**VA**



**U.S. Department of Veterans Affairs**

Veterans Health Administration  
Office of Community Care

# We will be beginning momentarily...

- For audio dial into: (800) 767-1750 x 85286
- Before we start, below are some rules of engagement to review:
  - Comments will be submitted via the *chat box* function.
  - Comments beyond the scope of the presented care coordination approach for the IHS/THP reimbursement Agreement will not be addressed during the session.
  - If you have a question about someone's individual case, consider discussing it directly with VA staff. Stephanie Birdwell and Clay Ward, from the Office of Tribal Government Relations are on-line and you can contact them at [tribalgovernmentconsultation@va.gov](mailto:tribalgovernmentconsultation@va.gov).

# Agenda

Moderated by Mr. Henry Huntley

- Opening Blessing – Capt. John Rael
- Rules of Engagement – Mr. Henry Huntley
- Panel members acknowledged – Mr. Henry Huntley
- Consultation objective and IHS/THP Reimbursement Agreement Program (RAP) overview - Dr. Kameron Matthews
- Review of the care coordination approach for the IHS/THP RAP – Dr. Elizabeth Brill
- Discussion – Mr. Henry Huntley



# Presenters



**Kameron Matthews, M.D., JD, FAAFP**

**Assistant Under Secretary for Health for  
Community Care, Office of Community Care, VA**



**Elizabeth Brill, M.D.**

**Chief Medical Officer, Office of Community Care,  
VA**

# Tribal Consultation Objectives

- Review background and benefits of the Indian Health Service/Tribal Health Program (IHS/THP) Reimbursement Agreement
- Provide an overview of the five components for enhanced care coordination
- Obtain feedback and address questions regarding the IHS/THP Reimbursement Agreement Program (RAP) Care Coordination Approach



# IHS/THP Reimbursement Agreements Program

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.

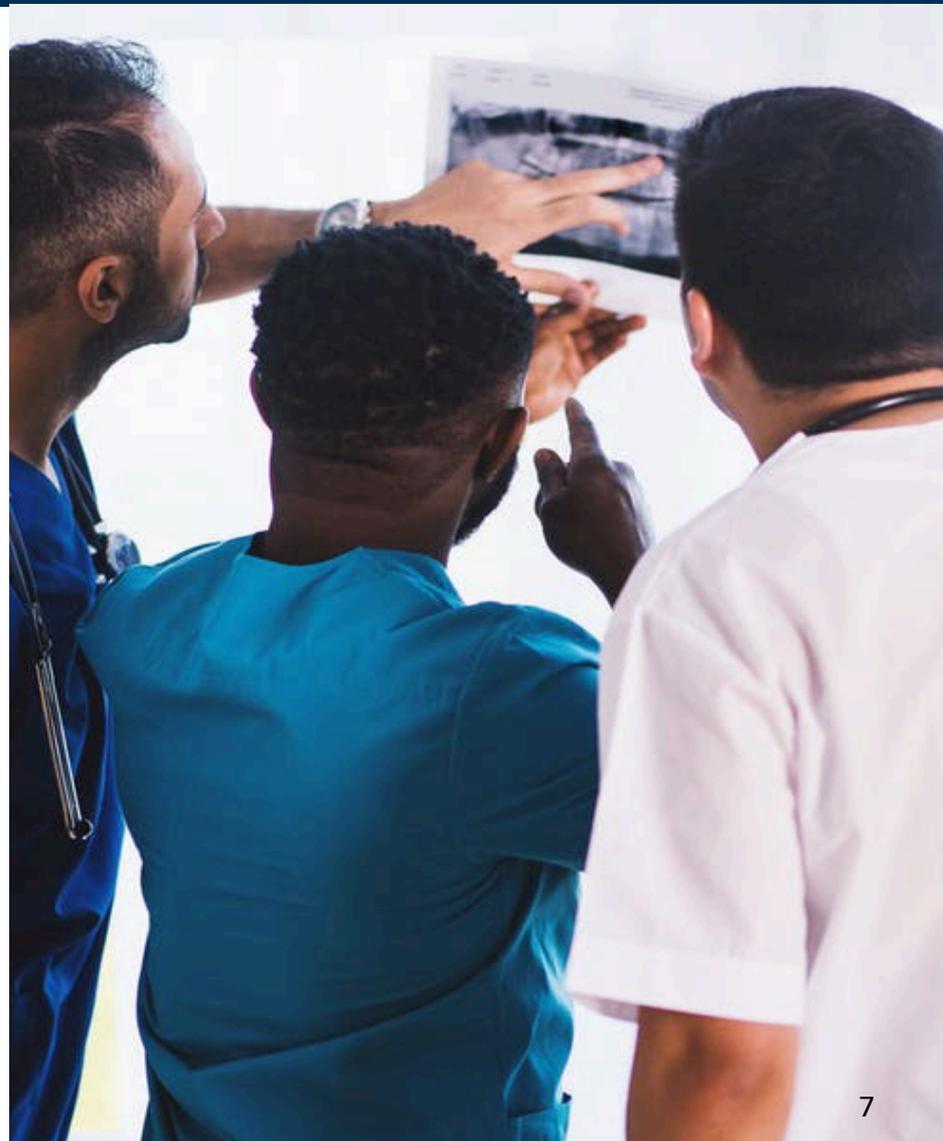
## Key Milestones

- Program part of a larger effort set forth in the VA and IHS Memorandum of Understanding signed in October 2010.
- The National VA-IHS Reimbursement Agreement was signed in December 2012 and individual THP agreements began to be implemented.
- The IHS/THP Agreement term have been extended to June 30, 2022.



# IHS/THP Program Benefits

- Collaboration between federal partners
- Greater access to culturally appropriate care
- Reimbursement for Outpatient Medications (on VA formulary)
- No Copayment for direct care services



7



Choose **VA**

**VA**



U.S. Department of Veterans Affairs

Veterans Health Administration  
Office of Community Care

# Healthcare Coordination Advisory Board (HCAB)

## Purpose

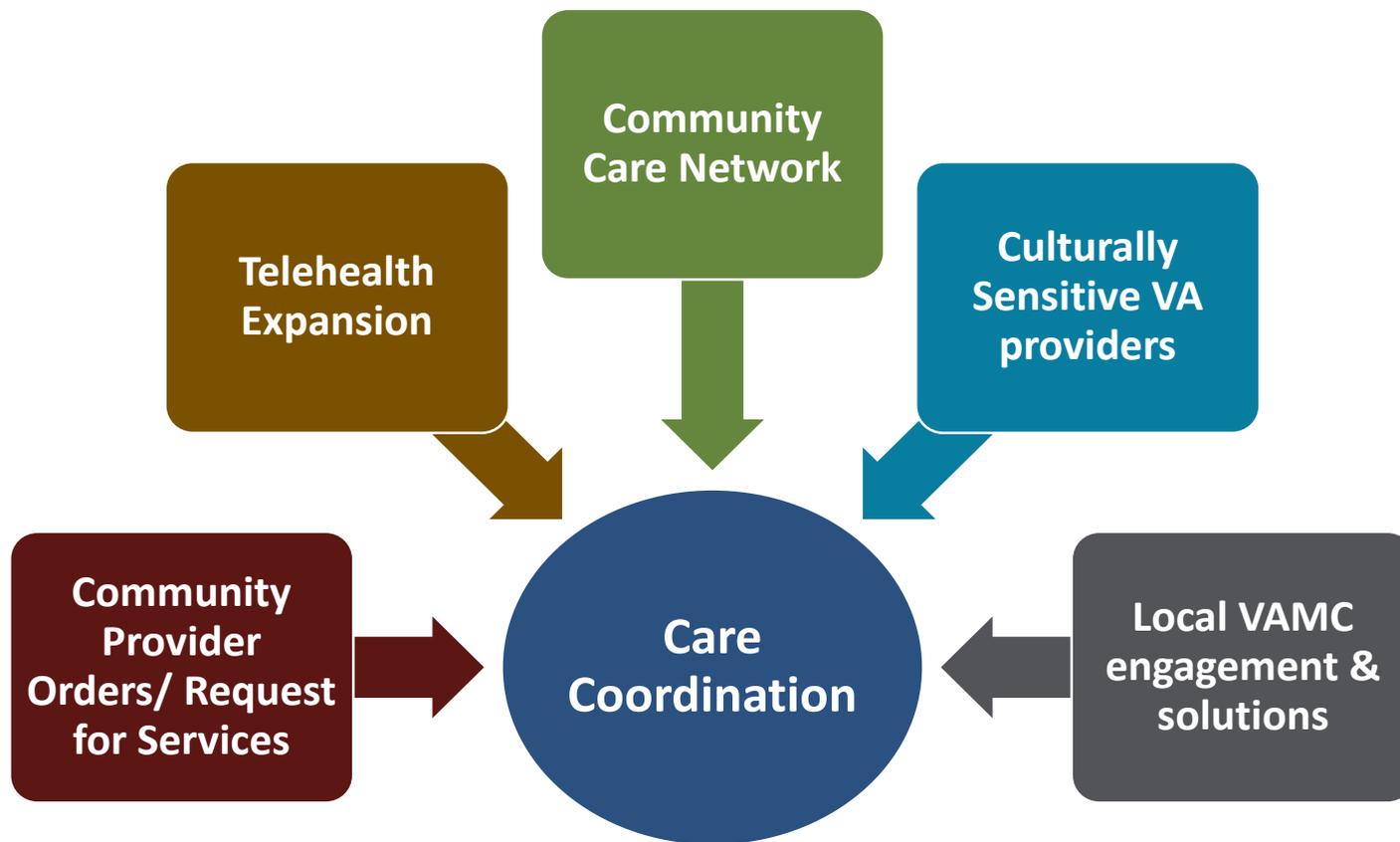
VHA OCC established the Healthcare Coordination Advisory Board (HCAB) to assist VA in developing and implementing standardized processes for care coordination for the RAP. The Board consists of 19 members: VA staff, IHS staff and a nomination from each of the 12 IHS service areas.

## 19 members

- VHA OCC Representatives (3 members):
  - Clinical Network & Management (CNM) Representative, (Chair) – Dr. Elizabeth Brill, Chief Medical Officer.
  - Clinical Integration (CI) Representative – Dr. Clinton Greenstone, Deputy Executive Director, Clinical Integration.
  - Providers Relations Services, VA-IHS/THP Reimbursement Agreement Representative – Kara Hawthorne, IHS/THP Program Manager.
- VA Office of Tribal Government Relations Representative (OTGR) (1 member) – Stephanie Birdwell, Director.
- Indian Health Service (IHS) Representative (1 member) – CDR John E. Rael, Director, Office of Resource Access and Partnerships.
- VA Medical Center Representative (2 members):
  - South Dakota – Dr Goodloe, Chief of Staff, Black Hills VAMC.
  - Alaska – Michelle Wyatt, Chief Community Care, Alaska VAMC.
- IHS Area Representatives (12 members) – (Name/Tribe):
  - Charles Akers, South central Foundation
  - Lynette Bonar, Navajo Tribe
  - Gil Calac, Yakama tribe
  - Jestin Dupree, Fort Peck
  - Melanie Fourkiller, Choctaw Nation of Oklahoma
  - Lona Ibanitoru, Susanville Indian Rancheria
  - Lucero, Robert, Ute Indian Tribe
  - Jeannette Jagles, Pueblo of Tesuque
  - Geri Opsal, Sisseton-Wahpeton Sioux Tribe
  - Mark Rogers, Absentee Shawnee Tribe of Oklahoma
  - Tihtiyas (Dee) Sabattus, Passamaquoddy Tribe and Indian Township
  - William Smith, Alaska Native Health Board



# Five Components of Care Coordination

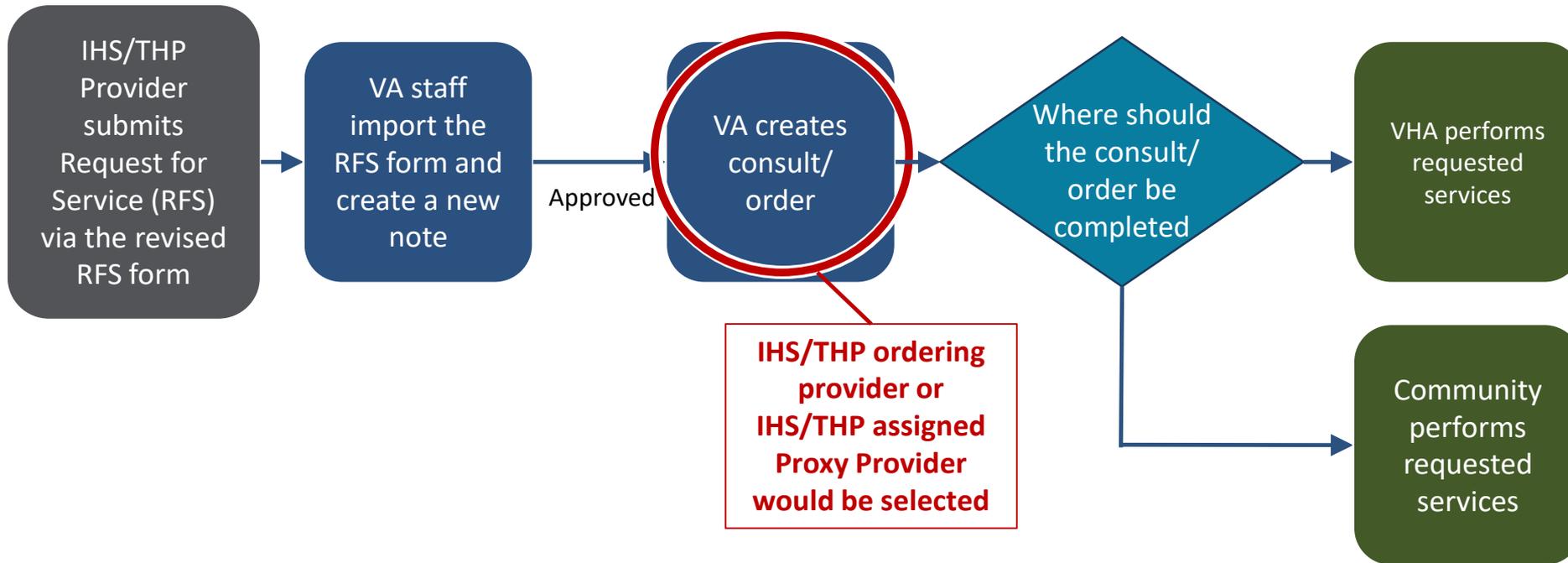


# Component 1: Community Provider Orders Process

The Community Provider Orders (CPO) process is a standardized approach for managing requests to VA for clinical services from external providers. VA is rolling the initiative out enterprise wide and is tailoring the process to meet the needs of the IHS/THP RAP.

- Enables IHS/THP providers to be entered as the requesting provider for the Request for Service (RFS) in VHA systems.
- Establishes the process as well as supporting tools required for placement, tracking, managing, and reporting requests from IHS/THP providers.

# RFS/CPO Process Overview for IHS/THP



*\*All requests for services in which the DOA lies outside of local community care RNs, will be forwarded/sent using current local process to appropriate DOA for review*

# System Requirements for Identifying IHS/THP Providers

Facilities could have the option of submitting a single point of contact or an entire provider list

## Option 2

 Load Chiefs of Staff

 Load 1 Chief of Staff for each facility

Will require submission and maintaining /updating of a designee from each of the 200+ tribes and

## Option 3

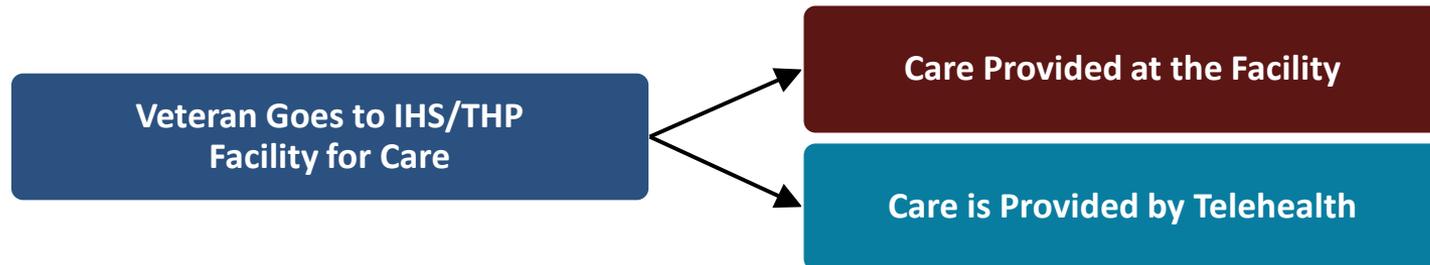
 Load All Providers

 Ensure all providers are uploaded

Obtaining ALL IHS/THP providers and maintaining the list may be cumbersome for IHS/THP Facilities and VA

# Component 2: Telehealth

- Expand agreements to include reimbursing for telehealth.
- Telehealth is considered an acceptable delivery mode for outpatient care, thus the established IHS All-inclusive rate in the current reimbursement agreements would also apply to telehealth services.



# Component 3: Community Care Network Collaboration

- When AI/AN Veteran healthcare needs are beyond what IHS/THP facilities can provide directly, tribal facilities can leverage the CPO process to request care from the VA, including use of the Community Care Network (CCN).
- VA's CCN contractors maintain a high-performing network to serve Veterans across the Nation, and network adequacy and quality are monitored.
- Tribes do not have the task for coordinating and scheduling care for services provided outside their facility, nor do they bear the burden of payment for additional services or be an intermediary in the payment process.
- Contract IHS/THP preferred providers (a.k.a PRC provides) that tribal facilities use, or wish to use, can join VA's CCN Network.



14



Choose **VA**

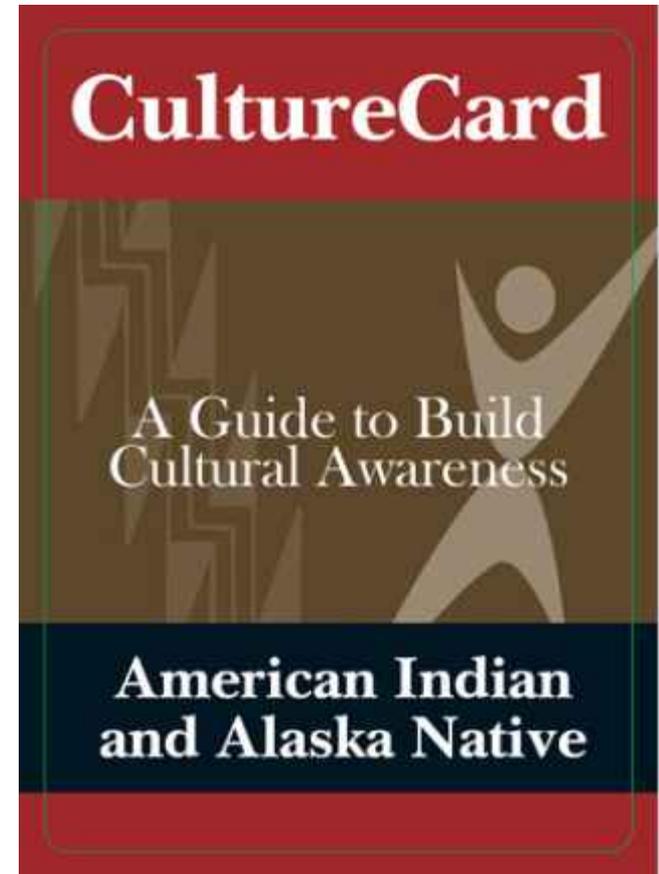
**VA**



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Community Care

# Component 4: Cultural Awareness Training

- Three (3) subgroups have been identified for targeted training:
  - VA Clinical Employees
  - VA IHS/THP Program administrative staff (e.g. Agreement Manager, contracting staff, eligibility staff, TVR's etc.)
  - VA CCN Network Community Providers
- The primary material used and distributed to all stakeholders will be the [SAMHSA Native Culture Card](#). A secondary resource will be the IHS Gold Book.



# Component 5: Local VAMC Solutions and Engagement with Tribes

The relationship with tribes at the local level is paramount to a successful care coordination process. This component focuses on:

- Local market scan to identify IHS/THP facilities
- Designating local level point-of contacts at the VA VAMC/VAHCS to facilitate the CPO/RFS process
- Outreach/meetings with tribes to discuss operations and to identify care delivery solutions tailored to the local communities



## Please comment in the **chat box**

When you submit your comment/question, please include your name, position, and tribal affiliation or organization. Optionally, you can provide your contact information for follow up.

Written comments may also be submitted to [tribalgovernmentconsultation@va.gov](mailto:tribalgovernmentconsultation@va.gov) before September 25, 2020, or by mail at Department of Veterans Affairs, Suite 915L, 810 Vermont Avenue, NW, Washington, DC 20420.



- Appendix –High Level Implementation Plans

# CPO Implementation Plan

- Finalize new version of RFS Form 10-10172 that, tailored for IHS/THP facilities
- Send email to tribes requesting a provider point of contact (Chief of Staff) or list of individual providers
- Receive the provider information and upload providers into the VHA Database
- Identify designated tribal POC's at each VAMC to facilitate the CPO/RFS process
- Create and deliver training for VA staff and tribes regarding the CPO/RFS process
- Update/create internal VA guidance documents (CPO SOP to include IHS/THP and the Field Guidebook (FGB)) and hold National Office Hours for VA sites



19



Choose **VA**

**VA**



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Community Care

# Telehealth Implementation Plan

- Execute modification to the IHS MOU and individual THP RAP agreements
- Educate IHS/THP RAP sites of new telehealth reimbursement allowance



# Community Care Network Implementation Plan

- Identify IHS/THP Preferred Providers (a.k.a PRC providers)
- CCN Contractors to outreach to preferred providers
- CCN Contractors to enroll interested providers into the CCN
- Educate IHS/THP RAP sites on CCN Network, including how a PRC provider would inquire about participation
- Establish a process for medical record return back to requesting tribe



21



Choose **VA**

**VA**



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Community Care

# Cultural Awareness Implementation Plan

- Provide training material to relevant VA Clinical Employees
- Provide training material to VA IHS/THP RAP staff
- Provide training material to CCN providers



22



Choose **VA**

**VA**



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Community Care

# Local VAMC Solutions and Engagement with Tribes Implementation Plan

- Develop National level leadership communication to stress the importance of locally engaging tribal lands/facilities.
- Local VAMC Leadership Engagement
  - Conduct outreach/facilitate meetings
  - Ensure tribes have local VA points of contact.



23



Choose **VA**

**VA**



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Community Care