

YDSP

YDSP PRC Guidelines

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IMPORTANT NOTICE

**PURCHASED REFERRED CARE IS NOT:
AN ENTITLEMENT
AN INSURANCE PLAN
GUARANTEED PAYMENT**

**PURCHASED REFERRED IS:
PAYOR OF LAST RESORT**

PURCHASED REFERRED CARE PROGRAM IS A FEDERALLY FUNDED PROGRAM OF THE INDIAN HEALTH SERVICES, A FEDERAL AGENCY.

THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OF YSLETA DEL SUR PUEBLO, A FEDERALLY RECOGNIZED INDIAN TRIBE, ADMINISTERS THE IHS PURCHASED REFERRED CARE PROGRAM FOR ITS MEMBERS IN EL PASO AND HUDSPETH COUNTIES, TEXAS.

PURSUANT TO STRINGENT LEGAL REQUIREMENTS AND UNDER STRICT LIMITATIONS, THE PURCHASED REFERRED CARE PROGRAM HELPS PAY THE COST OF NON-YDSP (“OUTSIDE”) HEALTH CARE RECEIVED BY TRIBAL MEMBERS.

PAYMENT FOR PRC BENEFITS HEALTH CARE SERVICES IS CONTINGENT UPON THE AVAILABILITY OF FEDERALLY APPROPRIATED FUNDS.



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SECTION 1: WELCOME TO PURCHASED REFERRED CARE

Ysleta Del Sur Pueblo (YDSP), through various programs of its Department Health Services (DHS), strives to ensure comprehensive health care for its Tribal Members. YDSP health services offer health care programs that include Family Practice Clinic, Family Dentistry Practice Program (PCP); and Purchased Referred Care Program (PRC). These guidelines provide information to Tribal Members on the PRC program. YDSP Tribal Council retains the right to modify these Guidelines in accordance with federal law and regulations.

THE PURPOSE OF PRC

Purchased Referred Care is an Indian Health Service (IHS) funded program, an agency within the United States Department of Health and Human Services. YDSP, through its HHS, administers the PRC program on its federal Indian reservation. Unlike other YDSP health care programs, PRC does not deliver health care services; it is a payment mechanism for certain health care costs incurred by eligible Tribal Members.

YDSP health care programs offer services through YDSP health care providers, such as the YDSP physician, dentist or optometrist, at YDSP health care facilities. Occasionally a Tribal Member must seek health care services outside HHS. We call this Outside health care.

Pursuant to legal requirements and under limitations PRC assists in paying portion of the cost of Outside health care received by a Tribal Member must meet the following criteria –

- the Tribal Member meets eligibility requirements;
- the Tribal Member could not have reasonably received the same health care services from a YDSP provider or facility;
- the PRC had authorized the treatment and approved the Outside provider or facility;
- if non insured, the Tribal Member must be seen at YDSP DHS for all care to include any specialty referrals for PRC payment.
- the health care services must meet priority level;
- the costs of the health care services are reasonable;
- all alternate resources have been sought and exhausted;
- federal funds are available for payment; and,
- the Tribal Member followed proper protocol in requesting PRC assistance.

Each one of the listed requirements or limitations is explained in these Guidelines.

It is important that Tribal Members and their Outside health care providers understand that PRC is the Payor of Last Resort. PRC will not pay unless there is no other money or method to take care of the cost of the Outside health care services. PRC is not a government entitlement; it is not an insurance policy; and it is not a third-party beneficiary payment guarantee. PRC is a very limited and restricted fund used to pay certain health care costs, and YDSP expects both Tribal Members and health care providers act in a reasonable fashion to conserve the fund to the greatest extent possible.

THE PURPOSE OF THESE GUIDELINES

The goals of the Guidelines are:

- provide information to Tribal Members about the PRC Program;
- provide guidance for the effective and efficient management of the Program;
- ensure coordination of PRC benefits with those of other YDSP programs and alternate resources;
- define and delegate to the PRC Committee and the YDSP Medical Director, to the greatest extent possible, authority and discretion to operate the PRC program; and,
- ensure compliance with applicable federal law and regulations

FEDERAL FUNDING AND PRIORITY STATUS OF MEDICAL NEEDS

The source of payments under the PRC Program is limited to federally-appropriated funds – the amount of money which Congress has made available to pay covered services. When federal funds are insufficient to cover all requests, YDSP will prioritize the expenditure of the money on the basis of relative medical needs. Annex A is the YDSP’s schedule of Priority Status of Medical Needs.

MEDICAL AUTHORITY

The PRC medical authority using medical records prioritizes the current Priority Status of Medical needs for payment.

SERVICE AREA AND POPULATION

The PRC Program’s service area is El Paso and Hudspeth Counties of Texas. The PRC’s service population is Tigua Tribal members in good standing with YDSP Guidelines.

INDIVIDUAL ELIGIBILITY

As resources permit, and subject to the PRC Guidelines,

PRC funds will be made available to the following individuals:

- Tribal Members in good standing with YDSP who reside in El Paso or Hudspeth Counties, and who maintain their current status with YDSP Census and PRC.
- Non-Indian female residing in El Paso or Hudspeth County and who is pregnant with the child of Tribal Member in good standing with YDSP regardless of tribal members residence regardless of the member’s residence. The Tribal Member must sign an Acknowledgment of Paternity Statement.

Eligible care shall extend from the first prenatal visit through the first post-partum visit, as well as any fees relating directly to complications from the pregnancy and delivery. Notification of the pregnancy must be given to the PRC Program by the end of the second trimester (the end of the 25th week) and



must utilize a PRC contracted provider.

- Non-Indian spouses and non-Indian dependent members of an eligible Tribal Member's immediate family for the treatment of acute infectious diseases or other conditions which constitute public health hazards such as flu season outbreaks.
- Transient individuals (persons who are in travel or are temporarily employed, such as seasonal or migratory workers) who would be eligible for Purchased Referred Care at the place of their permanent residence but are temporarily absent from their residences. Students who would be eligible for Purchased Referred Care at the place of their permanent residence but are absent during their full-time attendance at programs of vocational, technical, or academic education, including normal school breaks (such as vacations, semester or other scheduled breaks occurring during their attendance) and for a period not to exceed 180 days after the completion of the course of study. PRC shall rely upon the determination of full time status by the registrar of a student's school. Upon determination these individuals must follow all PRC guideline for payment.
- Tribal Members leaving the El Paso and Hudspeth Counties may continue receiving services for 180 days. Upon leaving the service area, the Tribal Member must notify the PRC Program of the departure in writing. Failure to notify PRC will result in a denial of request for payment. Eligibility will terminate after the 180-day period. Individuals under treatment for an acute condition shall remain eligible as long as the acute medical condition exists. This does not include continued treatment of chronic conditions that occur after 180 days.
- Minor Tribal Members who are placed and remain in foster care outside El Paso and Hudspeth Counties by order of a court of competent jurisdiction and who were eligible for PRC at the time of the court order.
- Tribal Members who would be eligible for Purchased Referred Care at the place of their permanent residence but are temporarily absent from their residences while traveling throughout the United States or travelling to foreign countries other than to Ciudad Juarez in Mexico, but only to the extent of 50% of the reasonable cost of medically necessary services not covered by alternate resources, or 100% in case of an accidental injury or medical emergency.

PROOF OF RESIDENCY IN EL PASO OR HUDSPETH COUNTIES

The Tribal Member must present a current proof of residency in the service area. The following types of proof are acceptable:

- Mail addressed to Tribal member or Tribal member's spouse, or children; driver's license, other official identification; current rent receipt, current utility statement (gas, electric, water) or a signed letter from the head of house hold with the utility statement (No more than 30days).
- PRC has authorization to confer with YDSP Housing Dept. for housing composition.

MEDICAL CARDS

PRC will sign clearance form to eligible individuals upon providing proof of insurance, alternate resource card or letter and proof of address. Uninsured Tribal Members will be issued a 30 day temporary medical card until proof of applying for an Alternate Resource.

AUTHORIZATION AND PAYMENT OF OUTSIDE SERVICES

PRC payments may be authorized for health care services obtained from outside providers or in outside facilities. Authorization will be considered if the event meets the PRC Priorities and up to two week notice is given. Normal authorization protocol differs in emergency and urgent care situations.

PRC EMERGENCY AUTHORIZATION

These are services preventing immediate death or serious impairments.

In emergency cases, the Tribal Member, or any interested party shall notify PRC within 72 hours of using an emergency facility. PRC medical authority will review ER notes and prioritize.

Elderly have 30 days to notify PRC of emergency health care services when using an emergency facility. An elderly individual is one who is 62 years of age or older.

EMERGENCY CARE PROVIDERS

See Annex C for a list of Emergency care providers

URGENT CARE PROVIDERS

See Annex D for a list of Urgent care providers

OBSTETRIC SERVICE REQUIREMENTS

PRC must be notified of the pregnancy by the end of the second trimester (the end of the 25th week). Confirmation of pregnancy is required in writing by a medical provider or facility.

- Tribal Members with no resources is required to apply for Medicaid. A letter of eligibility/denial from Medicaid must be presented to PRC within 72 hours of reporting pregnancy.
- when using PRC as a secondary payor you must use a PRC contracted provider.
- PRC covers two sonograms. Additional sonograms must be medically necessary and be approved by the PRC Medical Authority.
- PRC requires notification upon delivery of newborn child and a paternity test will be required. A penalty of repayment will be imposed if any documents or information is falsified.

PHARMACY SERVICES

Prescribed medications are covered by PRC please see Annex E for a list of PHARMACY STORES. Any single copay/ prescriptions over the amount of \$100.00 will need authorization by PRC.

ALTERNATE RESOURCES

TYPES OF ALTERNATE RESOURCES

Alternate resources are listed on Annex F

CONSIDERATION OF ALTERNATE RESOURCE IS NOT OBTAINED OR USED

PRC is always the Payor of Last Resort. PRC payments are made only when all alternate resources have been exhausted. Failure to exhaust alternate resources includes the failure to obtain resources for which the Tribal Member is eligible. Denial may occur for the following reasons:

- if the Tribal Member has failed to exhaust all alternate resources.
- if there is a lack of documented efforts or the refusal to apply for alternate resources when there is a reasonable possibility of availability.
- if an alternate resource program issues a denial because the applicant failed to supply information or to complete the application.
- Medicaid and Medicare applicants must provide a copy of the denial or acceptance letter and notify PRC as soon as coverage has expired, changed or is terminated.

APPEALS

APPEALS PROCESS

- PRC will mail a letter stating the reason for the denial of payment.
- The applicant may obtain reconsideration with additional supporting information not previously submitted; to the PRC Committee or
- If no additional information is submitted, a request for reconsideration or appeal shall be in writing supporting the request or appeal to the PRC Committee. If the original decision stands the applicant shall be so notified via mail in writing and advised that an appeal may be taken to the YDSP HHS program director within 30 days of receipt of the notice of the reconsidered decision.

ANNEX A

PRIORITY STATUS OF MEDICAL NEEDS

The system of medical needs priorities remains necessary to assure that available PRC funds are appropriately expended for services in accordance with IHS Guidelines. The current PRC Priority of Medical Needs schedule is as follows:

Priority One

Services required preventing immediate death or serious impairments:

1. Obstetric and Pediatric Emergencies
2. Cancer Treatment
3. Eye Emergencies
4. Psychiatric Emergencies
5. Dental Emergencies
6. Hemodialysis
7. Emergency Transportation
8. Surgical Emergencies
9. Special Shoes for diabetics must meet at least one of the following criteria:
 - a) documented loss of sensation of the foot
 - b) previous foot ulcer
 - c) previous amputation
 - d) severe deformity of the foot
 - e) evidence of internal hemorrhage or other pre-ulcer changes
10. Immunizations
11. Ear, nose and throat surgery when immediate threat to development of speech, language and hearing is documented
12. Gynecological tubal ligation when documented high risk medical conditions exist and subsequent pregnancy poses threat to life of mother or infant for example history of ectopic or molar pregnancies.
13. Cardiology emergencies

Priority Two

Services for potentially life-threatening/severe handicapping conditions:

1. Radiology/Nuclear Medicine not available on site including screening mammography
2. Specialty consultation: For acute care diagnosis, cancer, high risk OB
3. lab, x-ray, pharmacy, MD, nursing
4. Podiatry services-high risk medical
5. Prosthetics and Appliances
6. Severe Diabetic Complications
7. Severe Hypertension complications

Priority Three

Services, which contribute to better patient functioning, but not necessarily to prevent death or serious impairment:

1. Patient physical therapy
2. Specialty consultation when less than Priority Two
3. Hearing Aids
4. Podiatry/Orthopedics-less than Priority Two
5. Allergy services
6. Second opinions (to be approved by the PRC Committee on a case by case basis)

Priority Four

Services, which are elective or indefinitely deferrable:

1. Long-term residential psychiatric care
2. Preventive medicine
3. Non-emergency transportation
4. Any elective sterilization procedure
5. Physicals
6. Orthodontic services (non-cosmetic)

ANNEX B

YDSP DHS SERVICES

- Primary care
- Dental Services
- Optometry Services
- Social Services
- Mental and Behavioral Health Services
- Community Health Services
- Alcohol and Substance Abuse
- Transportation
- Diabetic Care Services
- Accupuncture/Accutox
- Lab

ANNEX C

EMERGENCY CARE PROVIDERS

- University Medical Center (for all non-insured)
- Del Sol Medical Center
- Sierra Hospital
- Providence Memorial Hospital
- Las Palmas Medical Center
- Foundation Surgical Hospital of El Paso (formerly East El Paso Physicians Medical Center)
- Sierra Providence East Hospital

ANNEX D

PHARMACY PROVIDERS

Walgreens location for non-insured, prescription must be written by DHS provider

- 100 N Americas Ave, El Paso TX 79907 (915) 790-0411

Advant-Edge Pharmacy

- 1576 Lomaland Dr, El Paso TX 79935 (915) 595-0409

ANNEX E

URGENT CARE PROVIDERS

- Candelaria Medical Center (insured and non-insured)
- Summit Urgent Care (insured only PRC will pay secondary)

ANNEX F

ALTERATE RESOURCES

- Medicare
- Medicaid
- University Medical Center Discount card
- Other state/federally-funded health programs (for example, CHIP STAR, SUPERIOR, EL PASO FIRST)
- Private Insurance (Cigna, Atena, Blue Cross, etc)-
- Third Party Liability (i.e. lawsuit settlement of vehicle accident)
- Workers Comp
- Affordable Care Act Marketplace Insurance plans