

## POLICIES AND PROCEDURE MANUAL

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|--|---|--|--------------------------|
| <b>Chapter:</b>  | <b>Service Delivery System</b>  |  |                          |
| <b>Title:</b>  | <b>Indian Health Services/Tribally-Operated Facility/Urban Indian Clinic Services (I/T/U)</b> |  |                          |
| <b>Policy:</b> <input checked="" type="checkbox"/><br><b>Procedure:</b> <input type="checkbox"/><br><b>Version:</b> 1.0<br><b>Page:</b> 1 of 2 | <b>Review Cycle:</b><br><br><b>Author:</b> Utilization Management & Waiver Director           | <b>Adopted Date:</b> 03.06.2018<br><br><b>Review Date:</b><br><br><b>Revision Eff. Date:</b> | <b>Related Policies:</b> |

DO NOT WRITE IN SHADED AREA ABOVE

### Purpose

To ensure that the Mid-State Health Network (MSHN) has a policy that standardizes the regional service coverage approach to be consistent with the requirements of the Michigan Department of Health and Human Services (MDHHS) and Pre-Paid Inpatient Health Plan (PIHP) contract.

### Policy

It is the policy of MSHN to pay any Indian Health Service, Tribal Operated Facility Organization/Program/Urban Indian Clinic (I/T/U), or I/T/U contractor, whether participating in the PIHP provider network or not, for PIHP authorized medically necessary covered Medicaid managed care services provided to Medicaid beneficiary/Indian enrollees who are eligible to receive services from the I/T/U provider either at a rate negotiated between the PIHP and the I/T/U provider, or if there is no negotiated rate, at a rate not less than the level and amount of payment that would be made if the provider were not an I/T/U provider.

### General

Under the Indian Self-Determination and Education Assistance Act (Public Law 93-638), tribal facilities, including Tribal Health Centers (THCs), are those owned and operated by American Indian/Alaska Native tribes and tribal organizations under contract or compact with Indian Health Service (IHS). Mental health and substance use disorder services provided at the THC to American Indian and Alaska Native beneficiaries do not require the authorization of MSHN.

American Indians and Alaska Natives who are Medicaid beneficiaries can obtain mental health or substance abuse treatment services directly from the THC or may choose to obtain services from a PIHP program. There is a process available for Tribal Health Providers to be reimbursed using Medicaid funds for providing behavioral health services, when the Tribal Health Provider has chosen not to be part of a Medicaid Health Plan's (MHP) or PIHP's provider network. Tribal Health Providers can also be paid by the PIHPs when they provide a covered medically necessary Medicaid service to a Medicaid eligible tribal member who has a serious mental illness or a substance use disorder. THC services are not included in the MDHHS §1915(b) Managed Specialty Services and Supports Waiver for PIHPs and substance use disorder services. THCs may refer tribal members to the PIHP/Community Mental Health Service Program (CMHSP) for mental health or substance abuse treatment services not provided at the THC.

Under the Michigan Medicaid State Plan, THCs have the option of choosing from one of three reimbursement mechanisms. The THC may elect to be reimbursed under only one of the options listed below, and the selected option applies to all beneficiaries receiving services at the THC.

The options are:

- A THC may choose to be certified as an IHS facility, sign the THC Memorandum of Agreement (MOA) and receive the IHS encounter rate in accordance with the terms of the MOA.
- Upon federal approval by the Health Resources and Services Administration, THC's may be reimbursed as a Federally Qualified Health Center (FQHC) by signing the FQHC Memorandum of Agreement. THC's choosing this option will receive the FQHC encounter rate set by the State in accordance with the Michigan Medicaid State Plan and federal regulations. The FQHC encounter rate applies to encounters for both native and non-native beneficiaries. A THC electing to be reimbursed as an FQHC is not required to have a contract with the managed care entity. If a THC chooses to be reimbursed as a FQHC, the entity would be required to adhere to the same requirements specified in the FQHC Chapter of the Michigan Medicaid Manual.
- A THC may be reimbursed as a fee-for-service provider. THC's choosing this option receive payment for covered services. No additional reimbursement or settlement is made.

The PIHP will have a designated tribal liaison who will ensure that any tribal members seeking services through the PIHP/CMHSP are able to access services efficiently and without barriers by serving as a primary point of contact in the MSHN region and by providing guidance to CMHSP and SUD service providers who perform access responsibilities on behalf of the PIHP.

**Applies to**

- ☒ All Mid-State Health Network Staff  
☐ Selected MSHN Staff, as follows:  
☒ MSHN's Affiliates: ☒ Policy Only    ☐ Policy and Procedure  
☐ Other: Sub-contract Providers

**Definitions**

CMHSP: Community Mental Health Services Program

FQHC: Federally Qualified Health Center

IHS: Indian Health Service

I/T/U: Indian Health Service, Tribal Operated Facility Organization/Program/Urban Indian Clinic

MDHHS: Michigan Department of Health and Human Services

MHP: Medicaid Health Plan

MOA: Memorandum of Agreement

MSHN: Mid-State Health Network

PIHP: Pre-Paid Inpatient Health Plan

THC: Tribal Health Center

**Other Related Materials**

**References/Legal Authority**

Medicaid Managed Specialty Supports and Services Concurrent 1915(b)/(c) Waiver Program/MDHHS-PIHP Contract

Michigan Medicaid Provider Manual/Behavioral Health and Intellectual Disabilities Supports and Services

**Change Log:**

| <b>Date of Change</b> | <b>Description of Change</b> | <b>Responsible Party</b>                 |
|-----------------------|------------------------------|--|
| 10.29.2017            | New policy                   | Utilization Management & Waiver Director |