

STRONG FAMILY HEALTH CENTER (SFHC)

PURCHASE AND REFERRED CARE POLICY & PROCEDURE MANUAL

DRAFTED DATE May 6, 2024

APPROVED January 29, 2025

SUBJECT: MEDICAL POLICY w/ Indian Health Service Medical Priority Levels of Care

Policy:

Strong Family Health Center's Medical Policy is to set general standards of services and medical care for SFHC Clients. This medical policy is not a substitution for communication with, or direction from a medical doctor. This medical policy is subject to change, as the Medical Priority Levels of Care are adopted by the SFHC Board of Directors according to the Indian Health Services (IHS) schedule of Medical Services - Levels of Care.

Purpose:

The purpose of Strong Family Health Center's Medical Policy is to promote and provide access to culturally acceptable comprehensive medical care for American Indian / Alaska Native clients in our service area at the highest level of care while utilizing the most cost-effective means within the resources available to SFHC.

Scope

The scope is to reduce the long-term adverse effects on individuals resulting from untreated or undertreated medical issues. In addition, to facilitate access to healthcare, promote early intervention and treatment for our clients.

Procedures:

1.0 Strong Family Health Center will support medical care to our clients in the most economical manner feasible, subject to available funding and to the Indian Health Service Medical Levels of Care adopted by SFHC Board of Directors.

2.0 Priority of funds will be given to Emergent/Acutely Urgent Care diagnostic or therapeutic services necessary to prevent immediate death or serious impairment of the health of the individual. Preventative healthcare primarily intended for symptomatic relief of immediate symptoms of a condition to alleviate discomfort and chronic maintenance with ongoing management of a chronic condition to prevent symptoms from worsening and maintain a stable quality of life, often requiring long-term lifestyle changes and medication regimens.

3.0 Strong Family Health Center will support access to healthcare for clients in our service area by utilizing IHS facilities, local providers and referrals to specialty providers as indicated by a primary provider. SFHC's intent is to connect clients with the appropriate facilities and providers to best meet their needs.

4.0 Eligibility

- a. All persons who are eligible for general medical care through SFHC's Purchase and Referred Care Program (PRC) are eligible for healthcare services
- b. The Purchased and Referred Care Policy applies to all Healthcare Services

5.0 SFHC is required by federal law to be the payor of last resort {42 CFR 136.61}.

- a. Clients must obtain services by providers that accept their primary insurance as the primary payor
- b. Clients are encouraged to maintain an alternate resource. {Alternate resource means health care resources other than those of the Indian Health Service for the payment of health services including but not limited to Medicare Part A, B and D, Medicaid/Medical, Partnership Health Plan of California, Covered California Plans, Veterans Affairs, Victim Services, Medical Payments on Auto Policies and Private Insurance (i.e. Anthem, Blue Cross/Blue Shield, Cigna, Mail Handlers Benefit Plan, Workmen's Comp)}
- c. Clients are encouraged to seek care from a SFHC contracted provider
- d. Clients with no primary insurance are encouraged to obtain their care from an IHS clinic under Direct Care Services

6.0 When specialized treatment or more advanced care is needed as requested by the client's primary provider through a referral; it may be procured under arrangement by SFHC, consistent with current Priority Levels of Care.

7.0 The frequency of examinations for adults and children shall be determined by the treating healthcare professional such as a Doctor, Physician's Assistant or Family Nurse Practitioner.

8.0 Division of Services

- a. Primary Medical Care Services generally occur through direct or contract care facilities. The level of services provided at any facility are dependent upon the medical care personnel available and the level of services provided
- b. Secondary Medical Care Services are provided as needed and in accordance with medical priorities for the management of complicated medical conditions and injuries. Secondary services need to be referred by the Primary Healthcare Provider

9.0 Priority of Care will be given to those PRC eligible clients needing immediate care to prevent the threat to life, limb and senses, loss of blood that will jeopardize the client's well-being, life threatening issues such as sepsis from infections and relief of severe pain.

10.0 Non-Elective Surgery will be performed consistent with SFHC priorities and must reported to SFHC within 72 hours of the event. Pre-authorization by the PRC Manager or Executive Director may be required. Such services must be a threat to the life of the client and if left untreated would result in a potentially grave outcome.

11.0 Elective Surgery will require a referral from a primary doctor and after rigorous review, payment may be authorized for one visit at a time if:

- a. Client has exhausted all other available resources
- b. The care is deemed Medically Necessary by the client's primary doctor and alternate resource
- c. The care is not available at an IHS Facility
- d. The care falls within the established medical priorities

12.0 All Procedures must adhere to the IHS Medical Priority Levels of Care as adopted by SFHC Board of Directors. Any procedures that fall outside the adopted Level of Care must have prior written approval by SFHC Executive Director.

13.0 Services not covered by SFHC under this policy or PRC are those considered cosmetic in nature, experimental or investigational, or have no proven medical benefit. Procedures "not covered" by Medicare or Medicaid in the CMS National Coverage Determination Manual.

- a. Alternative holistic therapies such as: yoga, meditation, aromatherapy, hypnotherapy, herbal remedies such as Cannabidiol (CBD) and acupuncture
- b. Purely cosmetic procedures or plastic surgery
- c. Intestinal bypass surgery including gastric banding / sleeve
- d. No over the counter health products will be paid without a written prescription subject to approval by the Managed Care Committee

14.0 Appointments

- a. All appointments must be reported to SFHC prior to the service date. Appointments can be reported in person at the SFHC office, by telephone, by messenger and online through the SFHC website at <https://strongfamilyhealthcenter.com>
 - b. Clients (a family member or friend) have 72 hours to report emergency care after the date of service
 - c. Reporting an appointment does not mean all services are automatically covered. Clients can be held personally responsible for services not covered by SFHC according to the Priority Levels of Care
 - d. The PRC Department will contact providers to pre-authorize services and arrange payment by SFHC
 - e. Services denied for payment by client's primary insurance that are not deemed medically necessary will be denied by SFHC
- F Service denied for payment by client's primary insurance may be presented to SFHC for consideration by the Managed Care Committee