

## **Update on Moving Certain Medicaid Claims for American Indian/Alaska Natives to Higher Federal Match Rate**

### **Update on “Received Through” Guidance**

In the June 2018 report on increasing the number of Medicaid claims matched at 100% for members who are American Indian/Alaska Native (AI/AN), the Utah Department of Health (UDOH) stated it would meet with Tribal leaders by the end of calendar year 2018. The purpose of meeting with tribal leaders was to determine whether tribes are interested in implementing Care Coordination Agreements or similar agreements that would allow the State to seek 100% federal match for additional claims.

On September 14, 2018, UDOH held a Tribal Consultation meeting with tribal leaders and the Utah Indian Health Advisory Board (UIHAB) regarding the Centers for Medicare and Medicaid Services (CMS) “Received Through” Policy. During this Tribal Consultation session, Nate Checketts reviewed the CMS policy guidance, including discussion of Tribal use of Care Coordination Agreements. In addition, the option to change a tribe’s provider enrollment designation from a “Tribal Facility” to a “Tribal Federally Qualified Health Center (FQHC)” was discussed as it would have a similar effect of increasing the State’s opportunity to seek 100% federal match for additional claims.

Under the Tribal FQHC option, federal regulation allows a tribal organization to enroll in Medicaid as a Tribal FQHC provider. As an alternative to tribal facilities using Care Coordination Agreements with non-tribal facility providers who provide services to AI/AN Medicaid members through a tribal facility referral, the Tribal FQHC designation allows tribal entities additional flexibility to submit claims for services rendered by sub-contracted, non-tribal facility providers. Claims submitted by the Tribal FQHC for AI/AN Medicaid members are eligible for 100% FMAP.

Since the September 2018 meeting, UDOH held calls with representatives of both the Utah Navajo Health Systems, Inc., and Paiute Indian Tribe of Utah, FourPoints Health. Both Tribal health executive leadership expressed interest in changing their provider designation to Tribal FQHC. It is unclear at this time how quickly the two-Tribal Organizations will proceed with their move to a Tribal FQHC and what impact this change might have on current claiming.

### **Update on Current Claiming Practices**

Certain Indian Health Services (IHS) facilities are designated to provide services almost exclusively to AI/individuals; however, federal law require these facilities provide services to non-AI/AN individuals in rare circumstances. In our preliminary discussions with CMS on this issue, CMS staff indicated concern with a potential methodology of claiming 100% federal match for all services provided in these IHS because of the potential exceptions. With this preliminary feedback from CMS, UDOH has scheduled a follow-up discussion with CMS in late February 2019, to get feedback on whether there are other claiming methodologies CMS may be willing to accept.