



Medicaid Coverage of Traditional Health Care Practices Provided at Indian Health

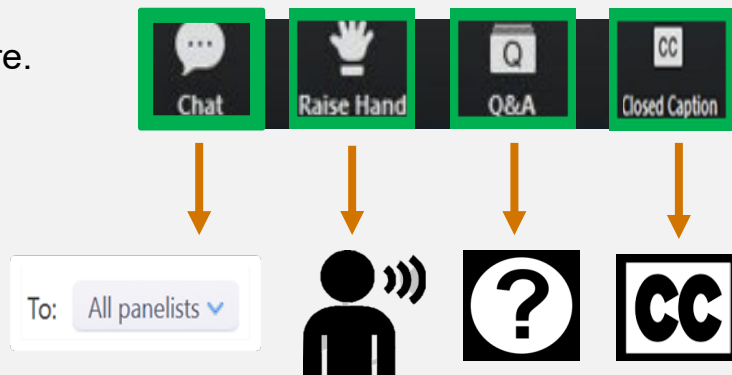
**Wednesday, April 3, 2024
3–5 p.m. Eastern Time**

Technical Notes and Support

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Enjoy the session!





Disclaimer

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Traditional Health Care Practices & Section 1115 Demonstrations

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This information is pre-decisional and subject to change.



Traditional Health Care Practices



- Wide use of effective traditional health care practices across Native Nations and over generations
- Administration goal: to recognize and support Indigenous Knowledge and improve timely access to health services
- American Indians and Alaskan Natives (AI/AN) experience significantly worse health disparities and culturally competent care can aid in addressing disparities

Background on Section 1115 Demonstrations



- Four pending requests: Arizona, California, New Mexico, and Oregon
- CMS works with a wide array of colleagues across the federal government to review requests, including with the Indian Health Service (IHS) and White House Council on Native American Affairs
- Currently seeking feedback and consultation on demonstration approach and general framework for coverage of traditional health care practices

Draft Proposed Framework

Traditional Health Care Practices in section 1115 demonstrations

- Eligible Beneficiaries
- Traditional Health Care Practices
- Providers/Practitioners
- Reimbursement and Infrastructure
- Evaluation

Eligible beneficiaries



- Eligible beneficiaries would include any Medicaid beneficiary eligible to receive services by or through IHS or tribal facilities.
- Practices would be reimbursed at 100 percent service match, which is otherwise available for AI/AN who receive services through IHS or tribal facilities.
- Non-AI/AN individuals can also receive these services, like all other services, by or through IHS or tribal facilities.
- States can also choose to include coverage through the Children's Health Insurance Program (CHIP).

- Traditional health care practices that align with the Indian Health Care Improvement Act, that are actively delivered by or through IHS or tribal facilities, could be covered and reimbursed under this proposed framework.
- This includes traditional health care practices that are provided in the community by or through IHS or tribal facility direct employees or contracted traditional health care practice providers.

Providers/Practitioners



- Providers and practitioners of these services would be required to be employed or contracted by IHS or tribal facilities.
- CMS is working with IHS to develop a high-level position description for general standards for practitioners.
- There would be no additional state licensing, credentialing or any other requirements beyond those which are already established by IHS and tribal facilities.
- Providers of traditional health care practices are individuals who are qualified to provide these practices, as determined by IHS or the tribal facility.

Infrastructure Funding



- CMS will consider infrastructure funding to states to enable providers to implement traditional health care practices. Although practices may already be offered, facilities are not currently reimbursed for the practice so may not have any coding, tracking, or reimbursement systems in place.
- Infrastructure funding can also aid in training staff and developing processes.

Post Approval and Evaluation



- Once CMS approves a demonstration request, CMS works with the state to create a plan for implementation and a process to monitor and evaluate the initiative. This negotiation can take several months, after which the state can implement the policy.
- Evaluations are expected to assess beneficiary awareness and understanding of the traditional health care practices; reasons for receiving these services; access to, cost of, and utilization of services; quality and experience of care; and beneficiary physical and behavioral health outcomes.

Not currently in framework

- Services provided at Urban Indian Health Programs;
- Services provided by non-IHS employed or contracted providers; and
- Services not otherwise delivered by or through IHS and tribal facilities.

**We are committed
to receiving and
incorporating
your feedback
into this policy.**

- Please submit feedback by **April 24, 2024** to tribalaffairs@cms.hhs.gov
- A copy of materials for this call, will be posted on the CMS AI/AN spotlight page <https://www.cms.gov/training-education/partner-outreach-resources/american-indian-alaska-native/spotlight>

Thank You



Questions?



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