Proposed AZ 1115 Waiver Language:

**AHCCCS Reimbursement for Traditional Healing Services**

**Purpose**

This waiver section supports reimbursement for Traditional Healing Services provided in, at, or through facilities operated by the Indian Health Service, a Tribe or Tribal organization, or an Urban Indian health program (I/T/U) to Medicaid eligible American Indian/Alaska Natives (AI/AN). This assures that an AI/AN AHCCCS member that has requested such services obtains reimbursable traditional healing services that are coordinated through these facilities.

**Overview - The Need to Establish Traditional Healing Reimbursable Services**

The Indian Health Service was established in 1954 and so began the efforts to increase access to conventional Western medical services in tribal communities. Yet long before this system of medical practice was made available and up to the present time, traditional American Indian healing practices have been a part of the lifeways of the twenty-two tribal nations and members of other Tribes that reside in the state of Arizona. Several Tribes, IHS and urban Indian health facilities continue to make available traditional healing services as a component of what it now conventionally termed, integrated service delivery. From an American Indian perspective, traditional healing practices are a fundamental element of Indian health care that helps patients achieve wellness and healing for a specific physical or mental ailment or affliction and to restore emotional balance and one’s relationship to the environment. AHCCCS recognizes that reimbursement for these services in a manner that retains the sanctity of these ancient practices that traditional practitioners’ is important. The Tribes advised AHCCCS that traditional healing services would aide care coordination and assist AI/AN AHCCCS members achieve improved health outcomes.

Upon approval the AHCCCS Medical Policy Manual (AMPM) shall indicate that the Indian health care or 638 tribal governing body shall adopt policies and procedures and determine the array of covered traditional healing services that may be offered. These may be conducted within the physical structure or on the grounds of the facility such as in a prayer or healing room or sweat lodge developed for this purpose. The covered traditional services, limitations, exclusions and insurance liability shall be described by each facility seeking to participate in this program. Per the approval of CMS, AHCCCS seeks to claim 100% Federal Financial Participation (FFP) for these services to reimburse the I/T/U facilities.

It is recognized that the training and qualifications of Traditional Healing Providers may vary widely depending on the Tribe served. For this reason a facility governing body may serve as the Qualifying Entity or designate another Qualifying Entity from the Tribe(s) served to endorse qualified Traditional Healing Providers.

AHCCCS shall deem a traditional healing service as medically necessary and billable at 100% FFP whether or not it is conducted in an outpatient or inpatient setting. In 1978, with the passage of the American Indian Religious Freedom Act, the Indian Health Service (IHS) policy issued at that time required the Service Units to comply with requests by patients seeking the services of native practitioners, to provide a private space to accommodate the services and required the staff to be respectful of a persons’ religious and native beliefs. In 1994, IHS updated the policy indicating that IHS would facilitate access to traditional medicine practices recognizing that traditional health care practices for many of the patients served contribute to the healing process and help patients maintain their health and wellness. The Indian Health Care Improvement Act (U.S. Code Title 25 Chapter 18) contains several sections noting the acceptance and respect for these practices and specifically incorporating them into various preventative service categories, including behavioral health services and treatment. A new section § 1680u of the Act has now clarified that, *Although the Secretary may promote traditional health care practices, consistent with the Service standards for the provision of health care, health promotion, and disease prevention under this chapter, the United States is not liable for any provision of traditional health care practices pursuant to this chapter that results in damage, injury, or death to a patient. Nothing in this*
subsection shall be construed to alter any liability or other obligation that the United States may otherwise have under the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450 et seq.) or this chapter. With nearly half of the Indian Health Service now operated by Tribes, the incorporation of a Medicaid traditional health services benefit will further enhance Indian health care in accordance with these long standing policies of the Indian Health Service.

AHCCCS Tribal Workgroup Process

Currently AHCCCS does not reimburse for Traditional Healing Services and seeks to obtain federal authorization to do so. A request to reimburse for these services has been added to the proposed Arizona Section 1115 Demonstration. The parameters identified by the AHCCCS Tribal Traditional Healing Workgroup were presented at an AHCCCS Tribal Consultation Meeting on 4/21/16. Following input from the 30 day public comment period, AHCCCS now submits to CMS the final language for American Indian Traditional Healing services. The purpose is to provide culturally appropriate options for AI/AN AHCCCS members to maintain and sustain health and wellness through traditional healing services made available at, in or through a facility that provides or arranges traditional healing services.

Tribes in Arizona have incorporated traditional healing practices into Indian health care delivery services. This integration, however, while beneficial to tribal members has not been considered a covered Medicaid service, despite it being promoted in the Indian Health Care Improvement Act and by IHS. Over the years, it has been minimally supported primarily through tribal funds, various pilot programs, grants, and individual personal resources. The Tribes have long recognized the valuable contribution of their healers and practitioners. They are valued for their role in aiding the healing of the spirit, mind and body. The goal of making available traditional healing services in, at or through I/T/U facilities in a complementary fashion with the western based delivery models is to benefit the AI/AN AHCCCS member that requests these services.

Definitions

**Facility:** Indian Health Service/Tribal Title I. or Title V. P.L.93- 638 Contractors/Urban Indian Health Organizations (I/T/U) located on and off Tribal lands.

**Medical Provider:** Licensed and/or credentialed healthcare professional responsible for the medical care of the patient.

**Traditional Healing:** A system of culturally appropriate healing methods developed and practiced by generations of Tribal healers who apply methods for physical, mental and emotional healing. The array of practices provided by traditional healers shall be in accordance with an individual tribe’s established and accepted traditional healing practices as identified by the Qualifying Entity.

**Traditional Healing Provider:** Individual recognized by the Qualifying Entity to provide Traditional Healing Services.

**Qualifying Entity:** Facility governing body or its designated entity with Tribal acknowledgment to endorse traditional healers and the services they perform.

**Service Parameters**

1) Traditional Provider/Facility Arrangements:

- Traditional healing services to be available to AI/AN Medicaid eligible members authorized by the Facility.
- Traditional healing policies and procedures developed by the Facility governing body.
• The process the Facility employed, entered into agreements, and/or contracted with a qualified traditional healer to provide the services.
• The policies in place by which traditional healing and the clinical and preventive allopathic health care providers consult each other and refer patients.
• The Facility system of performance evaluation or a customer service satisfaction survey that provides information on the effectiveness of the traditional healing program.
• The policies/procedures of the facility to obtain a signed release of liability by a patient.

2) Covered Services

• The coverage of traditional healing services will be limited to the practices approved by the facility to be performed and billed by the facility.
• Traditional healing services to be provided at I/T/U facilities and its programs initiated on 10/1/16, or on the approval date of the AHCCCS Demonstration renewal.
• The reimbursement to the facility for the costs of the service to include an appropriate payment for the provider, associated costs of supplies, and preparation and completion time associated with the traditional healing service.

3) Services Not Covered

• Services the Traditional Healing Provider is restricted from performing,
• Services contraindicated by the medical provider due to the potential to cause harm,
• Services not a part of the patient’s plan of care,
• Services without the patient’s consent,
• Services performed without the patient’s signed release of liability.

4) Qualified Traditional Healing Providers

• For the purpose of this waiver, an individual endorsed by the Qualifying Entity to provide Traditional Healing services.
• Official signed and dated endorsement letter by the Qualifying Entity that the traditional healing provider meets all qualifications to provide traditional healing services to be readily available upon request.

6) Traditional Healing Benefits

• The traditional healing member benefits are the types of services determined by the facility and include input by contracted or employed traditional healers of the facility that arrange with the facility to provide the services.
• As with many Medicaid covered services, traditional healing services must be coordinated within the context of a comprehensive plan of health care that includes specific individualized goals.

Reimbursement Methodology

As with many Medicaid covered services, traditional healing services must be coordinated within the context of a comprehensive plan of health care that includes specific individualized goals.

Consistent with all services billed under the Medicaid program, Facilities utilizing traditional healing services must comply with all Federal Medicaid regulations and policies.

Per the approval of CMS, AHCCCS seeks to claim 100% Federal Financial Participation (FFP) for these services to reimburse the I/T/U facilities. The following payment options are provided for consideration;
Option A. Per Encounter payment
AHCCCS to reimburse the IHS, Tribal and Urban health facilities (through arrangements), at the All-Inclusive per encounter rate available for Medicaid inpatient and outpatient hospital services for covered traditional healing services. The hospital services are billed on a UB 04 at the OMB All-Inclusive Rate (AIR) with the current rate published in the Federal Register.

Option B. Fee for Service payment
Fee for Service reimbursement to be based on traditional healing services provided to an individual patient. Reimbursement will be identified based upon AHCCCS HCPCS code for traditional services.

Option C. Member Benefit Allowance
This would be provided as an added value benefit to an eligible AI/AN through AHCCCS. A traditional healer recommends a ceremony that the patient needs and they are eligible for a determined benefit allowance each year. The practitioner will be paid upon completion of the service. The purpose of the reimbursement is to cover costs of conducting such services for the benefit of the patient.

Note: The All-Inclusive Rate (AIR) per encounter rate that a facility is to receive for providing these services or optional rate whether or not the traditional healing service is provided at an on or off reservation Indian health facility.