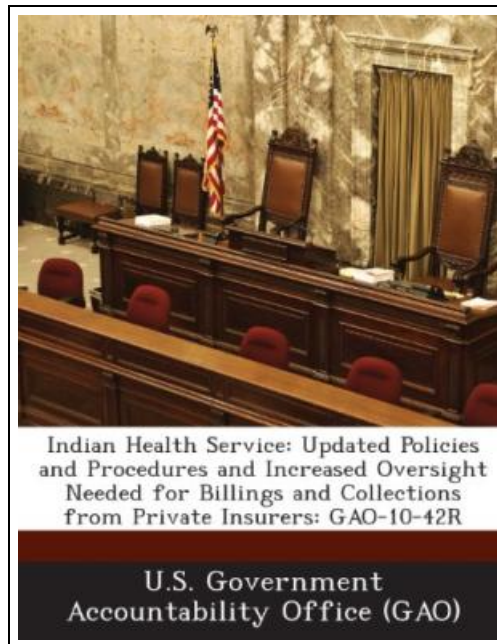


Indian Health Service: Updated Policies and Procedures and Increased Oversight Needed for Billings and Collections from Private Insurers: Gao



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Reviews



It is just one of my personal favorite publications. It is among the most awesome publications I have read. It is extremely difficult to leave it before concluding, once you begin to read the book.
(Delia Rutherford)

INDIAN HEALTH SERVICE: UPDATED POLICIES AND PROCEDURES AND INCREASED OVERSIGHT NEEDED FOR BILLINGS AND COLLECTIONS FROM PRIVATE INSURERS: GAO



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BiblioGov. Paperback. Book Condition: New. This item is printed on demand. Paperback. 24 pages. Dimensions: 9.7in. x 7.4in. x 0.1in. The Indian Health Service (IHS), an agency in the Department of Health and Human Services (HHS), provides health care services to American Indians and Alaskan Natives. For fiscal year 2009, Congress appropriated approximately 3.6 billion for health care services to be made available through IHS. The agency provides direct medical care, including primary care services, ancillary services, and some specialty services, through its network of facilities, including hospitals, health centers, and clinics. IHS also provides funding to direct care facilities that are operated by tribes. IHS headquarters oversees 12 area offices that cover 161 service units in 35 states. The Indian Health Care Improvement Act of 1976, as amended, authorizes IHS to collect reimbursement for services provided at IHS facilities from third-party insurers, including Medicare, the federal health insurance program for elderly and disabled individuals; Medicaid, a joint federal and state health financing program for certain low-income families and individuals; and private health insurers. IHS is allowed to retain funds collected from these insurers without a corresponding offset against its appropriations, so that all revenue collected by a facility remains with that facility, supplementing its appropriations. For fiscal year 2008, IHS reported that it collected about 795 million from all third-party insurers, of which about 94 million, or 12 percent, was collected from private insurers. The remaining 88 percent was collected from the Medicare and Medicaid programs. According to IHS, these funds were used to purchase new medical equipment and medical supplies, and to provide compensation and benefits for IHS employees. Given the importance of these collections to IHSs mission, Congress asked us to examine several areas related to IHSs billings and collections activities. Specifically, Congress asked us to review...

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