



BlueCross BlueShield  
of New Mexico



# Blue Cross Community Centennial<sup>SM</sup>

*A Centennial Care Plan*

1/9/2014

## Indian Health Services / Tribal 638 / Urban Indian Health

Services are funded in part under a contract with the State of New Mexico.

Blue Cross and Blue Shield of New Mexico refers to HCSC Insurance Services Company (HISC), which is a wholly owned subsidiary of Health Care Service Corporation (HCSC), a Mutual Legal Reserve Company. Both HISC and HCSC are Independent Licensees of the Blue Cross and Blue Shield Association.

*Note: Materials are subject to change based on ongoing feedback, newly communicated information and internal revisions.*

The acronym I/T/U identifies three different types of Native American Health Services:

1. Indian Health Services (IHS),
2. Tribal Health Providers (Tribal 638), and
3. Urban Indian Health Providers.

Native American Tribes have pre-existing agreements with the Federal Government as part of long standing Treaty Rights. These agreements are fulfilled in conjunction with the State Medicaid program.

## Indian Health Service:

Funding: Federally funded

Location: Both on and off of surrounding reservations.

Customer: Federally recognized Tribal Members from surrounding areas.

## Tribal 638 (P.L. 638):

Funding: The Tribe self-administers the funding and Health Services.

Location: Tribal Reservations (Federal Trust Land).

Customer: Tribal Members only.

## Urban Indian Health:

Funding: Non-Profit (501C3)

Location: Urban areas

Customer: All (Qualifying) Tribal Members

## Pre-authorizations

- Native American members do NOT need preauthorization to visit any Indian Health Service, Tribal 638 or Urban Indian provider (all together referred to as “I/T/U”).
- If a Native American member receive services outside the I/T/U network the preauthorization process WILL apply.

## Copayments:

- There are no copayments for all services rendered by an IHS, 638 Facility, or Urban Indian Facility, or for Native Americans.

## Credentialing and Re-Credentialing:

- I/T/U's currently have their own long standing credentialing process and requirements that are acknowledged by Blue Cross Community Centennial.

I/T/U

If I/T/U facilities and providers are not contracted in the Centennial Care provider network, the member can still see them. We understand the importance of a relationship between a member and an I/T/U provider. Our Care Coordinators can also help coordinate care with I/T/U providers.

- Native American members have the option to choose a MCO. After selecting a MCO they will have 90 days to switch. If they do not choose a MCO they will continue to stay on fee for Medicaid services.
- Choosing a MCO does not exclude them from Tribal Health Care Services offered, both on or off, of the Reservation.
- If a Native American individual decides not to choose a MCO they will not be eligible for the “Value Added Services”.

## Blue Cross Community Centennial Member Advisory Board

- Centennial will have 6 main advisory board meetings per year to discuss issues such as claims payment, service delivery, and quality of care.
  - Two (2) Regional
  - Four (4) Held in Albuquerque
- We will also need your help to provide feedback to see how we can improve our relationship with your community.