Indian Health Service (IHS) Encounters Transition Effective April 1, 2020

Did you know that the Managed Care Organizations (MCOs), including CHPW, are now paying for Indian Health Service (IHS) encounters?

Payment for IHS encounters (procedure code T1015, “clinic/encounter visit”) has transitioned from the Washington State Health Care Authority (HCA) to the MCOs. Effective with dates of service on and after April 1, 2020, the MCO pays IHS encounter rates for American Indian and Alaska Native (AI/AN) enrollees billed by an IHS clinic, Tribal 638 provider, or Tribal Federally Qualified Health Center (FQHC) for all services except dental.

In order for CHPW to pay the tribal encounter rate, tribes must meet the billing requirements in the HCA Tribal Health Billing Guide, including (but not limited to) those listed below.

1. Tribes must be listed on the Indian health care providers' National Provider Identifier (NPI) classifications list and must bill with that NPI.
2. Claims must have the designated billing taxonomy for the type of encounter/service performed.
3. Claims must have the appropriate AI/AN modifier.
   - Modifier UA to identify AI/AN members, not mental health services.
   - Modifier HE for mental health and modifier HF for substance use disorder (SUD) services for AI/AN members.
4. An encounter-eligible service must be billed on the claim.

Questions?
If you have questions about the information in this bulletin, please call CHPW Customer Service at 800-440-1561 or email CustomerCare@chpw.org.