

TRIBAL LTSS CHECKLIST

I. Tribe becoming Medicaid HCBS Provider

- Review and know state's provider requirements for the services you provide/want to provide*
- Apply for Medicaid Provider ID if you do not have one and/or Apply for an additional NPI specific to your LTSS program*
- Apply for the appropriate Medicaid provider type according to state rules*

II. Enroll Tribal members in Medicaid/Waivers & Medicare

- Work with staff from clinic, aging, community health and social services to identify people who may be at risk of nursing home placement*
- Plan a strategy to help your members gather and complete necessary documents such as providing printing/copies, scanning documents to store, help read letters and complete LTSS program forms*
- Aid Elders and other community members in enrolling and getting functional screens*

III. Create Tribal Service Menu & Update AFA

- Review state Medicaid Card/Waiver services and compare to the services you provide across Tribal departments/programs. Make a list of matching services – this is a good initial service menu and is reimbursement you may not be collecting.*
- Review possible Medicare billables (Home Health Care must be performed by a licensed provider, some Nutrition services are payable due to specific disease diagnosis, Nail care can be allowed if the patient has certain medical conditions)*
- Update your Annual Funding Agreement with IHS to add LTSS/HCBS services (example statements can be found on the NIHB website)*

IV. Billing for Services

- Set rates for the services you are providing. Review state Medicaid rates (often found as Max fees, Maximum Allowable, HCBS rates) as a guide to start*
- Plan and implement billing process that includes all Tribal departments providing services*

