

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Integrated Veteran Care



VA -Tribal Health Program (THP) Reimbursement Agreement **COVID-19 Purchased Referred Care Billing - 2024**

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Presented by:

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Purpose



- Provide information on the VA Tribal Health Program (THP) Reimbursement of COVID-19 care and services related to Purchased Referred Care (PRC)
- Provide training on the invoice submission process and requirements for COVID-19 care and services related to PRC

Topics

- Background
- Program Basics
- Required Documentation
- Submission Process
- Resources, Contacts, and Questions





Background

Effective March 1 , 2020, VA reimburses THPs for COVID-19 hospital care and medical services related to PRC provided to eligible American Indian/Alaska Native (AI/AN) Veterans.

THP Reimbursement Agreement modification language:

Section 11.5: *During the coronavirus (COVID-19) emergency period ONLY, the Secretary shall reimburse for care or service provided by THP through a contract established by THP (Purchased Referred Care) for care provided outside of the facility, when that care consists of:*

- 1. Items and services as described in section 6006(b) of division F of the Families First Coronavirus Response Act (or the administration of such products) for eligible American Indian/Alaska Native Veterans; or*
- 2. Hospital care and medical services for covered Veterans for the treatment of the virus SARS–CoV–2 or COVID-19.*



Program Billing Basics

Direct Care and Purchase Referred Care (PRC) Claims Submission processes are different.

- THP will be required to submit an *invoice* instead of a standard healthcare *claims* for payment.
- VA PRC reimbursement is the amount paid by the THP facility to the community or billing provider.

VA has a centralized claims and invoice processing center, Western Region Payment Operations (WR PO) that process all RAP Program claims and invoices.



Billing Requirements. Submission and Process

Presented by:

Brittany Moore, Western Regions Payment Operations



Scope

Date Range: Covers COVID-19 services during the related ***Emergency Period:***
January 27, 2020, to May 11, 2023.

Eligible services – **COVID -19 related healthcare services**, identified by having one of the below COVID-19 related Diagnoses codes:

- U07.1 COVID-19
- U09.9 POST COVID-19*
- B34.2 CORONAVIRUS Infection, unspecified
- B97.29 OTH CORONAVIRUS as the cause of diseases
- J12.81 Pneumonia due to SARS-associated coronavirus
- J12.82 Pneumonia due to coronavirus disease 2019
- B97.21 SARS-associated coronavirus causing diseases class elsewhere



Required Documentation (1 of 3)

1. Cover letter (in Excel format provided by the VA).

Elements include:

- THP facility name, TIN, Billing Provider NPI, and address
- Veteran information(Full name, full SSN *or* ICN (Client ID), DOB)
- Date of Service (From Date/To Date)
- Name of community provider Veteran was referred out to
- Pharmacy Tab (if applicable)
 - If submitting a pharmacy invoice, the pharmacy tab must also be completed.
- THP payment amount

Required Documentation (2 of 3)

Cover letter, Continued: Visual of cover letter and links to form

Tab one:

THP-PRC Billing
INVOICE

U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Integrated Veteran Care

THP Facility NAME:			
THP Facility ADDRESS:			
THP Facility CITY:	STATE:	ZIPCODE:	
NPI:			
Tax ID:			
TOTAL INVOICE AMOUNT (must exactly match E-services submission) \$			

		VETERAN INFORMATION				DATE OF SERVICE		SUBTOTAL	
E-Services order #	THP Tracking # (optional)	LAST NAME	FIRST NAME	UNIQUE ID (SSN or ICN)	DOB (MM/DD/YYYY)	Name of community provider/group	From Date (MM/DD/YYYY)	To Date (MM/DD/YYYY)	THP Payment Amount

Tab two (for pharmacy, if applicable):

THP-PRC Pharmacy
INVOICE

U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Integrated Veteran Care

VETERAN INFORMATION			DRUG INFORMATION				DATE OF SERVICE		
LAST NAME	FIRST NAME	UNIQUE ID (SSN or ICN)	NDC	NDC Description	Strength	Unit of Measure	Quantity	From Date (MM/DD/YYYY)	To Date (MM/DD/YYYY)



Cover letter can be found:



Online at
<https://www.va.gov/COMMUNITYCARE/providers/in-fo-IHS-THP.asp#Billing>



Or by emailing
VHA_104p_ops_western_region_nw_ihs_thp_support@va.gov



Required Documentation (3 of 3)

2. Associated Explanation of Benefit (EOB), or Payment (EOP).

3. Additional requirements:

- COVID-19 diagnosis code must be shown in the submitted supporting documentation.
- THP must provide a copy of the EOB/EOP from the Other Health Insurance (OHI) provided to them when billed by the Servicing Facility. EOB/EOP from OHI must be included in the supporting documentation.
- THP must provide a copy of the claim form (CMS 1450/1500) billed to them by the Servicing Facility in the supporting documentation.
- Total invoice amount to *exactly equal* the support documentation submission included on the cover letter.

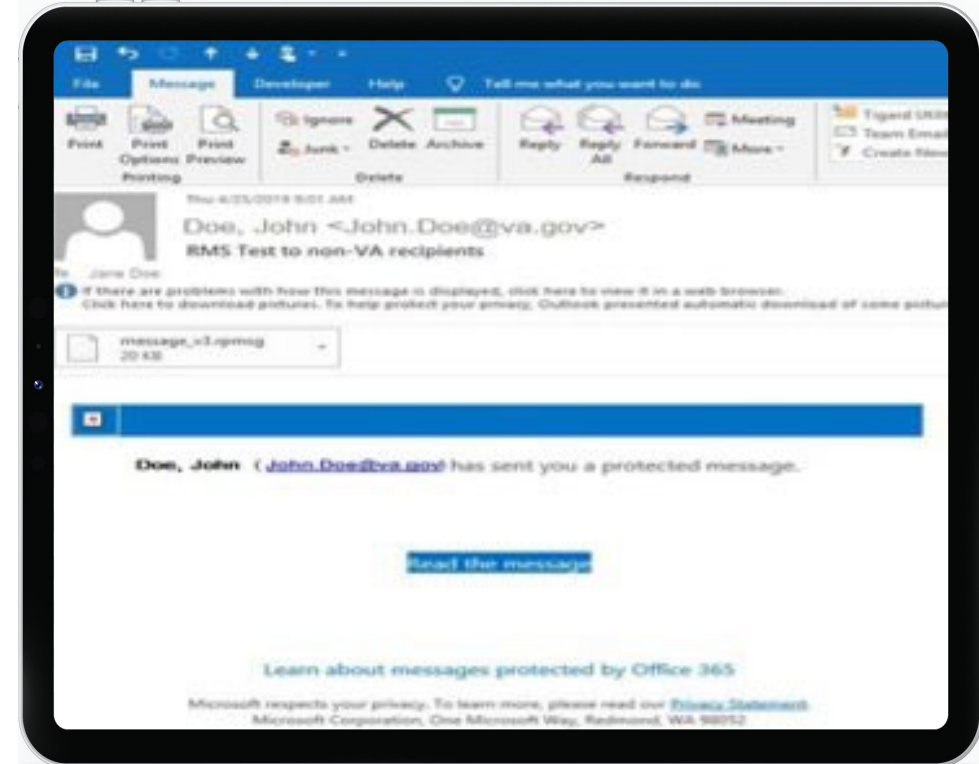
Submission Process

- THP will submit a request to receive a VA Outlook RMS secure email to vha_104p_ops_western_region_nw_ihs_thp_support@va.gov.
- VA Payment Operations will reply with a secure, encrypted email the THP can reply to with the cover letter and supporting documentation. Once VA receives the PRC invoice from the THP, PO will review and make annotations on the cover letter regarding determination for approval or explanation of rejection and return to the THP via the RMS secure email.
- For issues and inquiries, related to submitted e-invoice contact NW POM at vha_104p_ops_western_region_nw_ihs_thp_support@va.gov.

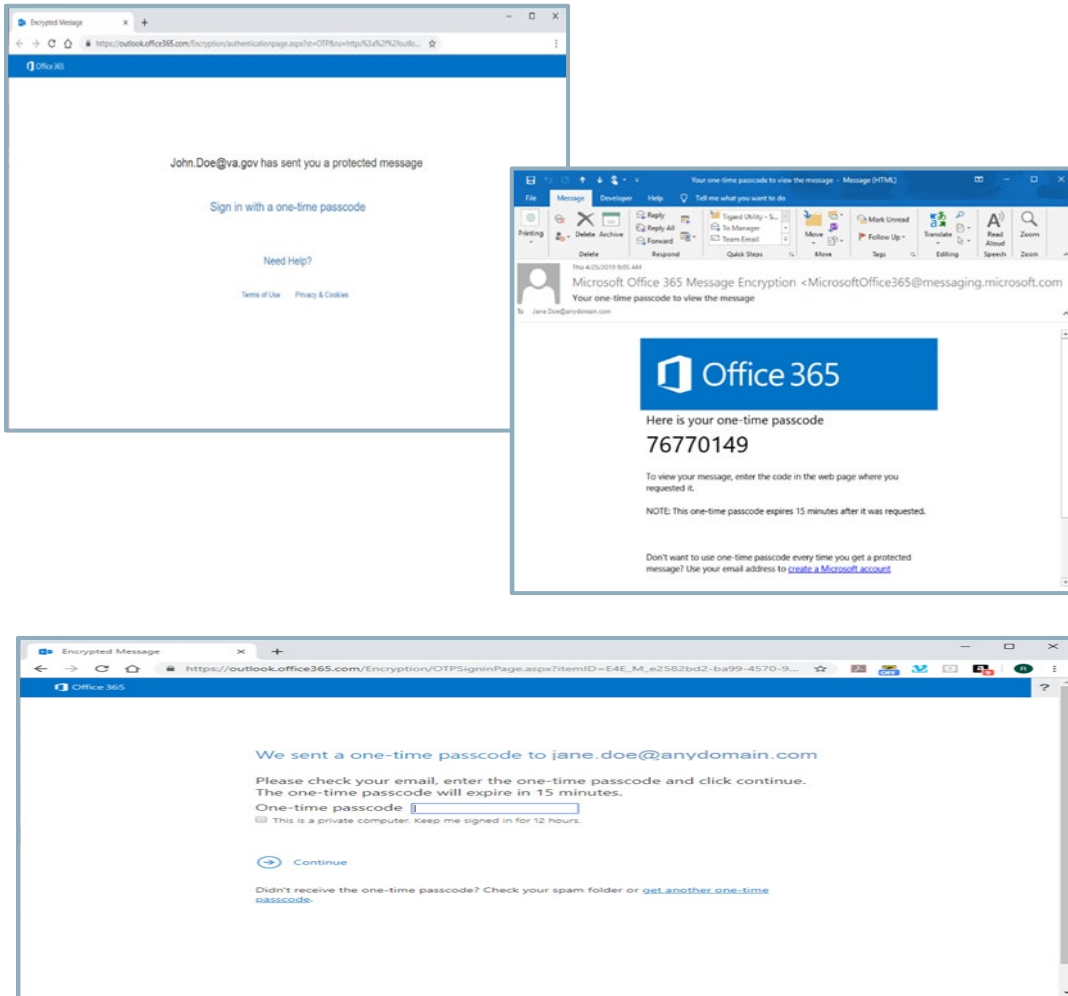
Secure Messaging Instructions

THP facilities will need to use the VA Outlook Secure RMS system to securely send emails. The VA Outlook Secure RMS process are as follows:

- THP facilities will need to email VA PO ITU Support Group at vha_104p_ops_western_region_nw_ihs_thp_support@va.gov to request access to the VA Outlook Secure RMS.
- THP/UIO recipients will receive an email message that has a link to read the message in Microsoft's Office 365 web portal. The recipient should click the "Read the message" link in the email to launch the portal.



Secure Messaging Instructions, continued



- Once the Office 365 portal loads click the “Sign in with a one-time passcode” and an email will be sent to the recipient's email with a one-time passcode.
- Copy the one-time passcode from the email. Enter the one-time passcode and click “Continue” and the encrypted message will open.
- From here, THP staff can respond to the sender’s message securely and attach the documents as needed.



Pharmacy Billing

VA Formulary requirements are still required for COVID-related PRC:

VA will reimburse THP only for pharmaceutical drugs/supplies on the formulary used by VA. Requests for reimbursement of pharmaceutical drugs not on the VA formulary will be submitted for approval to the local VAMC Pharmacy in advance of the request for reimbursement.

Here is the link to the VA Formulary listing: <http://www.pbm.va.gov/NationalFormulary.asp>
Search engine: <http://www.pbm.va.gov/apps/VANationalFormulary>

VA Criteria for Use for many Non-VA formulary drugs: <http://www.pbm.va.gov/PBM/clinicalguidance/criteriaforuse.asp>

THP must use cover letter to submit pharmacy invoice and must contain the following:

- Date of fill
- Pharmacy name
- Drug name (generic name)
- Amount paid by the other health plan or for Pharmacy
- Quantity/NDC Unit
- Dr.'s name
- Drug strength
- Retail price
- Number of day's supply
- National Drug Code (NDC)
- Prescription number

PRC VA Non-Formulary Requests

- THP requests for reimbursement of pharmaceutical drugs not on the VA formulary will need to be approved by the local VAMC in advance of the request for reimbursement. The local VAMC pharmacy will provide THP the process for submitting the request.
- If a medication being billed is not on the VA Formulary, the billing THP must obtain a VA Non-Formulary Approval notice and annotate “PAO NF” (Prior Auth Obtained – Non-Formulary) on the invoice. The "PAO NF" annotation should be noted in Column K of the PRC Cover Letter (Pharmacy tab, next to the Date of Service).
- A copy of the Prior Authorization should be included in the supporting documentation for the PRC submission.



Timeframe for VA Reimbursement

- VA Payment Operations will adjudicate PRC invoices within 45 days of receipt.

- VA will annotate. by line, the disposition of payment and email the cover letter back to the THP.

SUBTOTAL		
THP Payment Amount	Approved/Rejected	VA Notes
\$2,135.00	Approved	VA will reimburse \$2,135.00.
\$25.39	Rejected	Veteran was not enrolled/eligible at time of service.

- Payment – will be received shortly after VA adjudication
 - Electronic EFT, direct deposited
- Explanation of Benefit (EOB) or Payment (EOP) may take between 4 - 6 weeks to be delivered to the THP.
 - Mailed to the address you have in your vendor file or electronically received



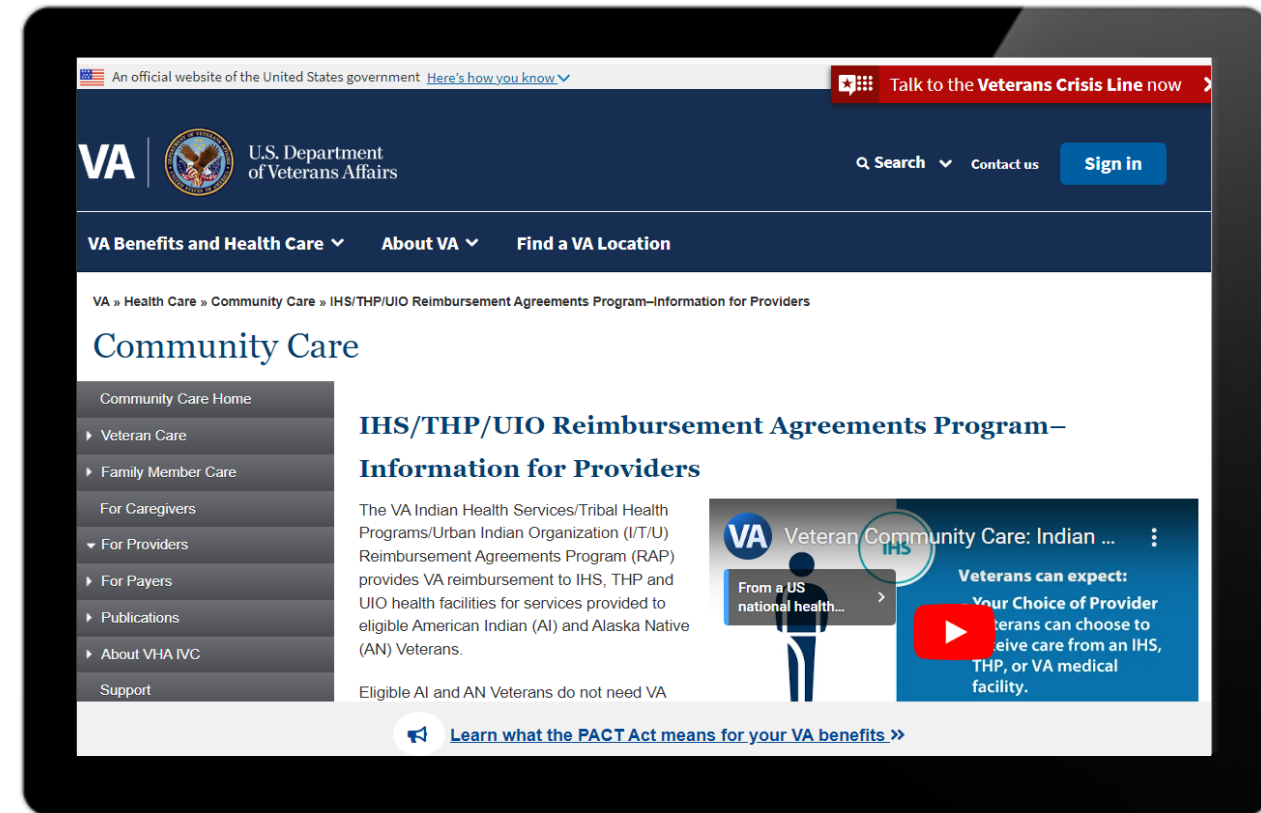
Submission of Corrected Invoices

- Corrected invoices will be submitted via the same process to the VA's ITU Support Group email.
- THP will annotate that the submission is a correction in the body of the Outlook Secure RMS email message.



Resources and Contacts

- Website: <https://www.va.gov/COMMUNITYCARE/providers/info-IHS-THP.asp>
- [Provider guide](#) – contains specific operational details
- VA PO – ITU RAP Billing email: vha_104p_ops_western_region_nw_ihs_thp_support@va.gov
- ITU RAP Program email: tribal.agreements@va.gov





Thank you



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