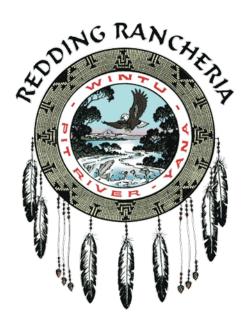
REDDING RANCHERIA TRIBAL GOVERNMENT POLICIES

Chapter TP 9-000

General Health Services Policies



February 15, 2022

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SECTION 1: PURPOSE

To set forth the general operating structure and overall policy guidance for the Redding Rancheria Tribal Health System and related health services.

SECTION 2: BACKGROUND AND INTENT

(a) Philosophy and Approach

The Redding Rancheria Tribal Health System (System) is committed to the health and well-being of its patients who depend on the System for services.

The delivery and financing of health services is a costly undertaking and the Tribe recognizes that there will never be adequate resources to finance all health care needs. Priorities will always be necessary, and individuals will need to take full advantage of available resources in order to create an equitable health program to benefit the entire eligible service population.

The Indian Health Service support of tribal health programs, to provide direct care and Purchased/Referred Care (PRC) services is expected to diminish in terms of purchasing power. Sustaining essential health programs will require a vigilant cost containment effort, full productivity of staff, collections for all qualifying services and most importantly, a healthier service population.

The Health Service Program must be operated with business principles while maintaining a personal and sensitive approach to patient care. The cost of providing services must not exceed the available resources. Accordingly, those services that cannot be offered as "direct care" services due to lack of available resources, may be offered on a fee for service or cost-reimbursement basis to the extent that they improve the overall delivery of care and can be offered on a cost effective and economical basis.

The Tribe strongly believes that individuals and families are the ultimate owners of their own health. They have the primary responsibility for properly managing their lives and each aspect of their health. The services of the System are to be organized to assist in that process.

The services that are delivered by the Tribe must be of the highest quality and conform to the standards of the professions represented. Quality management and improvement must be an on-going process and include peer review, quality improvement and risk management.

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(b) Mission Statement

The mission of the Redding Rancheria Tribal Health System is to improve the health of our patients with high quality health care services and effective health promotion/disease prevention strategies for Redding Rancheria tribal members and other Indians residing in the service area. The foundation of our service includes:

- (1) Cost effective, reasonable access;
- (2) A commitment to excellence;
- (3) A compassionate, respectful attitude; and
- (4) Involvement of the patient and family in health care decisions;

These things will ensure a high quality, accessible, responsive and well-coordinated delivery system of health education, promotion and health and wellness services.

(c) Goals

- (1) Continually measure and monitor the health status of our community and develop effective health promotion/disease prevention strategies along with wellness programs to reduce health risks.
- (2) Identify the needs of our patients and set priorities for programs and services.
- (3) Provide the highest quality service, achieve and maintain accreditation and comply with all the standards of the health professions that are represented.
- (4) Ensure that all contacts with patients include education that will assist individuals and families to make appropriate choices about their health.
- (5) Attract the necessary resources to maintain high quality services and expand those services whenever possible to meet patient needs.
- (6) Develop and monitor productivity measures to ensure the efficient use of resources and the effective collection of third-party revenue.

(7) Ensure the appropriate integration of services with those offered by other health agencies and health related programs.

SECTION 3: DEFINITIONS

(a) Redding Rancheria Tribal Health System: Redding Rancheria health services programs operated pursuant to or in conjunction with the Compact of Self-Governance between the Redding Rancheria and the United States Department of Health and Human Services.

SECTION 4: DELEGATED AUTHORITY

The Redding Rancheria Tribal Council (Council) is responsible for the development and management of the Redding Rancheria health services programs. Consistent with its legislative role, the Tribal Council intends through this policy to delegate appropriate authorities and responsibilities to individuals and teams employed to carry out the programs. The Council hereinafter delegates health program management roles and duties to tribal officials, reserving to itself certain executive roles and those roles and duties which are legislative in nature.

(a) Tribal Council

The following authorities are reserved to the Council:

- (1) Approval of overall policy and guidance for the health programs.
- (2) Adoption of mission, goals, objectives and general strategies of the Redding Rancheria Health Program.
- (3) Adoption of budgets and appropriation of funds to support the Health Programs.
- (4) Appointment of the Chief Executive Officer and establishment of the duties and qualifications of the office.
- (5) Adoption of official tribal positions with respect to federal health program legislation, appropriations and regulations.
- (6) Approval of major contracts pursuant to the Redding Rancheria Fiscal Policy.
- (7) Approval of grants and other government-to-government agreements, and the conduct of government-to-government relationships between the Tribe and federal, state and local governments.

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- (8) Approval of borrowing and financing arrangements.
- (9) Review of the programs to address problems and issues requiring policy direction, legislative or executive action.
- (b) Chief Executive Officer (CEO)

The Chief Executive Officer is the senior member of the Tribe's Administrative structure. As such, this position has broad responsibilities. The position:

- (1) Represents the Tribe by name, title and signature, and executes all agreements with the federal, state and other governments, and other entities as authorized by the Council.
- (2) Speaks for the Tribe on issues related to the programs available to serve the Tribe from the federal and other governments.
- (3) Consults with and advises management officials on financial matters.
- (4) Appoints the key directors for the Health Programs and provides oversight of the management of the Programs.
- (5) Ensures that tribal support services, (e.g. Facilities Operations, Personnel Management, Planning, Information Management and Finance) are responsive to the needs of the Health Program consistent with this policy.
- (6) Recommends and implements policy of the Tribal Council.
- (7) Recommends and implements budgets.
- (c) Chief Operating Officer (COO)
 - (1) Assures that the Tribal Administrative Support Services are responsive to the needs of the Health Services Program.
 - (2) Identifies and addresses issues impacting the administration and management of the Health Program.
 - (3) Serves as a member of the Health Program Management Team.
 - (4) In the absence of the Chief Executive Officer, assumes the responsibilities of that office.

(d) Chief Financial Officer (CFO)

The Chief Financial Officer is primarily responsible for the operation of tribal accounting, budgeting, procurement, property management and other fiscal management systems. The CFO is expected to be fully qualified in all aspects of financial management. The CFO is selected and appointed by the Chief Executive Officer, in consultation with the Tribal Council and other management officials. The CFO:

- (1) Provides for the implementation and maintenance of accounting systems and processes to account for all tribal financial matters.
- (2) Establishes and maintains support systems for budgeting and financial planning.
- (3) Participates in the development and recommendations of financial policy, plans and strategies, and budgets.
- (4) Provides for the implementation of procurement and property management systems and processes.
- (5) Establishes written procedures for all assigned functions.
- (6) Publishes written instructions as needed for use by the tribal organization in the implementation of budgets and the conduct of tribal business.
- (7) Maintains the official budget of the Tribe and a record of all actions. Prepares for certification of the Treasurer, such budget actions as are authorized by the Council and budget policy.
- (8) Oversees the preparation and release of payments for all tribal obligations, pursuant to budget and tribal policies.
- (9) Provides technical assistance to the Tribe in the development and maintenance of fiscal management capacity and certifies the adequacy of fiscal management policies and systems employed by the Tribe for the administration of tribal funds.
- (10) Serves as a member of the Health Program Management Team and oversees the financial and accounting operations, including collections, for the health programs. Provides specific cost accounting systems and support as needed by the program.

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(e) Executive Body for the Redding Rancheria Tribal Health System

The Executive Body for the Health Program is the Tribal Executive Team which consists of the senior staff of the Tribal Administrative structure to include: Chief Executive Officer, Chief Operating Officer and the Chief Financial Officer. The Tribal Executive Team is delegated this authority by the Tribal Council and will act on its behalf with the following authorities:

- (1) Recommends the approval/adoption of overall organizational policies and guidance.
- (2) Review of programs to address issues requiring policy direction, legislative or executive action.
- (3) Approve Quality Improvement Plan, approve credentialing and privileges for medical staff; assures quality of care is evaluated and identified problems are appropriately addressed.
- (4) Oversees and monitors a system of financial management and accountability.
- (5) Ensures a program of risk management and processes for the identification, reporting, analysis and prevention of adverse incidents.
- (6) Adopts operating procedures for Health Program operations.
- (7) Formulates short-term and long-range strategic plans in accordance with the mission, goals and objectives of the organization.
- (8) Provides direct supervision of the Executive Director of Health Services.

(f) Executive Director of Health Services

The Executive Director of Health Services is the senior management position assigned to administer the Redding Rancheria Health System. This position coordinates and facilitates the implementation of the Tribal Health Policy. It is intended that this position ensures participation of the Health Program Management Team, individual program directors and health professionals to develop internal management procedures and practices for the Program.

(1) Represents the Redding Rancheria Health System by name and title, as delegated, in carrying out the Health Programs.

- (2) Appointment authority of Health System employees will be in accordance with Personnel Policies of the Tribe.
- (3) Provides for performance evaluations of program and staff.
- (4) Oversees the overall health programs in conjunction with the Health Program Management Team.
- (5) Administers overall Health System budgets and ensures adherence to tribal policies.
- (6) Determines lines of authority, accountability and supervision of health program personnel.
- (7) Reports to the Chief Executive Officer and Tribal Council on all pertinent matters affecting policy and budget.
- (8) Operates and maintains the health programs consistent with Redding Rancheria Tribal Government Policies for the health system.
- (9) Develops and recommends improvements to Tribal health system policies, and provides for their review on an annual basis, with recommendations to the Executive Team and Tribal Council.
- (10) Develops general operating policies for the organization necessary to implement the business plan, and submits them to the Executive Team for review, prior to implementation.
- (11) Develops and publishes the organizational structure and functional statements that identifies responsibilities and describes relationships with other parts of the operation.
- (12) Recruits professionals, administrative staff and support staff needed for the system. Ensures that all employees follow the established program policies and procedures. Reviews credentials and recommends the extension of privileges to individual providers.
- (13) Recommends and implements the budget for the operation of the system in accordance with Fiscal Management Policies of the Redding Rancheria and other applicable policies.
- (14) Establishes and publishes program objectives and priorities consistent with community needs and available resources.

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- (15) Ensures that quality of care is evaluated and identified problems are appropriately addressed.
- (16) Provides for performance evaluations of program (outcomes, progress) and staff (productivity measures).
- (17) Provides for maintenance of professional accreditation and credentialing of professional staff, and ensures that an effective quality improvement and risk management program are in place.
- (18) Provides for appropriate processes to evaluate patient satisfaction and address patient complaints.
- (19) Ensures effective communication and coordination with other health and health related agencies and recommends intergovernmental agreements needed to advance health care for the community.
- (20) Ensures effective communication and teamwork throughout the organization.
- (21) Examines federal policy and appropriations and makes recommendations to and on behalf of the Redding Rancheria.
- (22) Reports to Tribal Management and the Tribal Council on program status, trends and important issues affecting health programs.
- (g) Health Program Management Team

The management of multiple health programs anticipates a team approach to plan and coordinate the delivery of high quality services. The Health Program Management Team will be appointed by the Chief Executive Officer. The Executive Director of Health Services will develop the roles and responsibilities of the HPMT for approval by the Executive Team.

(h) Department Directors

The Department Directors are charged with the day-to-day management of their respective departments. As such they must:

- (1) Develop and recommend operating procedures.
- (2) Develop department procedures in accordance with tribal policy, operating procedures, accreditation requirements and professional standards.

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- (3) Provide day-to-day supervision of assigned department staff and periodically review performance and training needs.
- (4) Participate in case management of patients with complicated health conditions.
- (5) Manage their programs within the limits of the budgeted resources.
- (i) Senior Director of Information Services
 - (1) Provides for the implementation and maintenance of data and telecommunication systems supporting the System operations.
 - (2) Arranges the transfer of pertinent information to the Indian Health Service on a timely basis.
 - (3) Arranges or provides staff training necessary for operating the information and telecommunication systems.
 - (4) Assures that computer hardware and peripherals are operating well.
 - (5) Arranges for software upgrades as they become necessary.
 - (6) Accesses the database to provide reports and information to the Health Program Management Team.

SECTION 5: AUTHORIZED PROGRAMS AND SERVICES

There are four types of health services administered by the System for which eligibility and operational policy must be established:

(a) Direct Clinical Services

Those services provided directly by and within the System from available Indian Health Service resources, with nominal charge, if authorized, or without charge to eligible Indians, or on a fee for service basis to persons not eligible for direct Indian Health Services as outlined within this policy.

(b) Purchased/Referred Care

Those services, drugs and medical supplies acquired from outside the System.

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(c) Health Promotion and Prevention Services

Those services, drugs and supplies provided to individuals and groups with risk factors which could lead to more serious health problems.

(d) Wellness Services

Those programs and services provided to support individual and family wellness and fitness related activities.

(e) Fee for Service and Cost Reimbursable Services

Those services, supplies and pharmaceuticals provided to patients on a fee for service or cost reimbursable basis only.

SECTION 6: INDIAN HEALTH SERVICE COMPACT

The Redding Rancheria operates the health related programs authorized by this policy in accordance with a Compact of Self-Governance (Compact), a government-to-government agreement between the Redding Rancheria and the Federal Government. The Compact provides for the transfer of federal resources and authority for the provision of health care to Redding Rancheria members and other eligible Indians within the agreed upon service delivery area. Responsibility and authority for the management and operation of the programs are transferred, through the Compact, to Redding Rancheria.

The Compact provides authority for the Redding Rancheria to design and redesign, to establish priorities for the programs and their financing, and for the Secretary of Health and Human Service to waive, at the request of the Redding Rancheria any applicable federal regulations that are not mandated by law, in order to ensure that the Tribe can design and operate the program in a manner most consistent with the needs of the community, as determined by the Tribal Council. Legal authority and guidance are provided by Titles I and V of the Indian Self-Determination Act, as amended, and by Indian Health Care Improvement Act. The Tribal Council intends to use full discretion afforded it by the Compact and federal laws in designing and operating programs, while complying with the terms of the Compact. Quality standards anticipated by the Compact are incorporated within this policy, to provide a basis for regular evaluation of programs.

Funding Agreements attached to the Compact describe the services that the Tribe will provide and address in further detail the agreements between the Federal Government and the Redding Rancheria.

The Chief Executive Officer shall review the Compact and Annual Funding Agreements with the Tribal Council and advise the Tribal Council when changes are appropriate for negotiation. When such changes are needed, the Tribal Council may appoint a negotiating

committee, or may direct the Chief Executive Officer, by resolution, to negotiate and execute changes.

SECTION 7: USE AND APPLICATION OF IHS FUNDING

Because IHS resources are limited, federal law requires that patients take full advantage of alternate resources for which they are eligible. It is therefore a requirement that each patient access all alternate resources available. IHS resources will be utilized and applied to services for which no alternate resources can be accessed. System staff will assist individuals in obtaining the alternate resources for which they are entitled.

SECTION 8: GENERAL STANDARDS

- (a) Administrative systems and processes shall be designed to make efficient use of resources and to minimize administrative time required of direct services providers in order to maximize patient/provider time.
- (b) Marketing and communications plans and systems shall be implemented in such a manner as to assure quality information to the community on a regular basis about the health programs and community health conditions. Internal and external communications systems shall ensure that the program is viewed as a highly professional and competent organization.
- (c) Human Resources shall be administered in accordance with personnel management policies adopted by the CEO. A written plan of organization and position descriptions shall be in place to assure clear lines of authority and responsibility, and assignment of all duties and functions necessary to the programs mission. Effective recruitment and retention programs shall be in place to ensure that the program maintains a highly qualified and professional work force to carry out its mission. Compensation and benefits for all positions shall be established based on regularly conducted market analysis. Training funds shall be identified and budgeted to ensure that professional credentials and employee skills are maintained through continuing education and upgraded as opportunities arise.
- (d) Financial resources shall be administered in accordance with Fiscal Management Policies and policies incorporated herein. Effective multi-year financial planning and budgeting will be implemented. All available resources will be considered and appropriate outside resources sought to support the goals of the program. Financial reserves shall be developed and maintained to support the ongoing financial health of programs. Effective financial and budget reporting will be maintained. All employees are expected to provide for efficient use of resources.

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- (e) Information Management systems shall make effective use of available technology for the collection, analysis, use and reporting of information by the organization. Staff shall be appropriately trained in operation and use of applicable hardware and software. Information reporting shall be developed to support quality and timely decision making at all levels of the organization. Reporting shall incorporate all needed information about workload, cost, epidemiology, billing and revenue. Appropriate policies and safeguards shall be in place to ensure confidentiality and security of information.
- (f) Facilities management and planning shall ensure effective preventative maintenance, security and safety programs to protect and preserve all facilities and those that use them. Facilities shall be clean and well maintained at all times, and a maintenance project schedule for non-routine maintenance shall include prioritization and estimated costs. A long-term facility plan shall incorporate cyclical and non-cyclical facility operation and maintenance cost projections and renovation and replacement plans.
- (g) Program goals, objectives and productivity measures shall be identified and monitored each year for each program (i.e. medical visits, dental visits, collection targets, costs per unit of service, etc.). These objectives and productivity measures shall be adopted by the Executive Director of Health Services, within program business plans and reported to the Tribal Management and Tribal Council.
- (h) Each encounter which qualifies for collection from an alternate resource shall be billed to the appropriate source in a timely fashion. The Executive Director of Health Services shall set appropriate standards and monitor compliance. All fee schedules shall be periodically reviewed (at least annually) to assure that bills are competitive with the surrounding medical community. Appropriate follow-up activities shall be pursued for all billed services prior to a determination that the accounts should be written off.
- (i) Patient Responsibility: The programs shall adhere to federal laws and regulations regarding the use of alternate resources. Patients must periodically certify that the registration information provided is accurate. The statement signed shall state that any misrepresentation of the information can result in loss of eligibility and personal liability for billed charges and collection costs. Such certification shall be required annually at a minimum and is necessary for billing and Purchased/Referred Care authorization. The patients are required to apply for any third-party programs for which they are entitled or eligible.

SECTION 9: REPORTS

The Executive Team shall establish, through operating procedures, minimum reporting requirements for monthly, quarterly and annual reports consistent with the needs of the Executive Team and the Tribal Council.

SECTION 10: IMPLEMENTATION

The officials as assigned herein, who shall collaborate in review of this policy annually and make recommendations to the Council, shall provide for implementation of this policy and all required systems and procedures.

Legislative History:

Originally Adopted by Tribal Council Resolution #04-08-97-G, dated April 8, 1997.

Amended by Tribal Council Resolution #036-06-01-04, dated June 1, 2004.

Amended by Tribal Council Resolution #007-02-07-06, dated February 7, 2006.

Amended by Tribal Council Resolution #022-04-12-07, dated April 12, 2007.

Amended by Tribal Council Resolution #039-05-15-08, dated May 15, 2008.

Amended by Tribal Council Resolution #028-06-12-12, dated June 12, 2012.

Amended by Tribal Council Resolution #019-02-15-22, dated February 15, 2022.

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