# Sac and Fox Nation

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November 17, 2015

Centers for Medicare & Medicaid Services (CMS)
Department of Health and Human Services
Delivered Via Electronic Mail at TribalAffairs@cms.hhs.gov

***RE: Tribal Consultation Regarding the Changes to the Interpretation of the "Received Through" Provisions with respect to Indian Health Services or Tribal Facilities***

Esteemed Members of CMS,

I am writing to you on behalf of the Sac and Fox Nation in response to the October 2015 request for Tribal Consultation from CMS regarding the reinterpretation of services "received through" the Indian Health Service or Tribal Facilities. The Sac and Fox Nation is directly affected by this reinterpretation as we are a Self-Governance Nation receiving IHS funding and operate our own Clinic within our tribal jurisdiction. This is a critical issue to the Sac and Fox Nation, and all other Federally Recognized Tribes, because it will affect both the billing of our services and the options for patient care we can provide.

After a thorough review of the proposed changes included in the Tribal White Paper presented to the Tribal Nations, the Sac and Fox Nation would like the express our support of the re-interpretation and the efforts being made by CMS in this area.

Our support of the proposed changes is twofold. First, we feel that the re-interpretation will provide a significant benefit to improving our patient care and our ability to provide high quality services in our service area. As it stands now, the Sac and Fox Nation is a Primary Care Provider for Oklahoma Medicaid services. However, with Oklahoma not participating the Medicaid expansion, we have had a number of issues with referrals and patient services. The proposed re-interpretation would be highly beneficial to all Tribal Nations in states where the Medicaid expansion has not been enacted because it would save the states money and provide us with the ability to make more services available to our Tribal Members and Native American Clients.

Secondly, we find that the interpretation expansion is beneficial to our Nation specifically because it would allow us to have continuity of service and provide care that is desperately needed. Examples of the care that could be provided would be the provision of transportation associated with our community health programs and ambulance services that would be received from our facilities. As a health system dedicated to Native Americans, we face a number of



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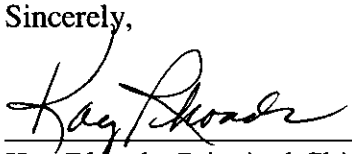
special challenges surrounding diabetes and diabetic patients. A growing area of concern is in wound care which if provided can both save a patient trauma and provide a significantly higher quality of life. We recently had a patient who was at a high risk for a foot amputation due to a diabetic ulcer. However, with surgical debridement, wound care, and the use of nutritional therapy the Black Hawk Health Center of the Sac and Fox Nation was able to save the patient's foot and significantly improve his quality of life. With the expansion of the "received through" interpretation we would be able to offer this type of service to more patients. Being able to provide the wound care services, transportation services, and nutritional therapy would be a great benefit to our Nation and our patients.

In closing, I would like to express my support for the CMS' proposed changes to the interpretation. We are looking forward to seeing definite language in the future and to working with the Centers for Medicare and Medicaid services to build a better care and support system for all of our Native American patients.

Sincerely,



Kay Rhoads, Principal Chief
Sac and Fox Nation