Title: Offering Patients Choice of Health Care Providers

Effective Date: 12/04; Rev. 11/07, 9/08, 8/11

POLICY: IHS facilities shall provide patients requiring certain health care services a choice of health care providers as required by law.

SCOPE: IHS system-wide. All IHS and affiliate facilities except for physician practices.

BACKGROUND: The purpose of this policy is to ensure that patients have adequate information to make informed decisions in the selection of their health care providers in certain settings.

PROCEDURES:

1. Post Hospital Home Health Care, Skilled Nursing Care and Hospice Services.
   1.1 If a patient of an IHS hospital requires home health care, skilled nursing care, or hospice services following their care at the IHS facility, the IHS facility shall provide the patient with a list or brochures of health care providers in the community who provide the type of service needed by the patient.
      1.1.1 For home health care, skilled nursing care, and hospice services, this list shall include all Medicare certified health care providers who provide the applicable service in the geographic area in which the patient resides or in the geographic area requested by the patient.
      1.1.2 IHS facilities may obtain this information for Medicare certified hospice, home health care agencies and skilled nursing facilities from the Centers for Medicare & Medicaid Services (CMS) website at www.medicare.gov or the Iowa Department of Inspections and Appeals website at www.dia-hfd.state.ia.us.
      1.1.3 For patients enrolled in managed care organizations, the IHS facility must indicate the availability of home health care and post-hospital extended care services through individuals and entities that have a contract with the managed care organizations.
1.1.4 The IHS facility shall document in the patient’s medical record that a list or brochures of providers were provided to the patient or to the individual acting on the patient’s behalf.

1.1.5 In order for patients to have adequate information to make an informed decision about choice of a post hospital health care provider, the list or brochure shall indicate if a listed health care provider is affiliated with an IHS entity.

1.1.6 If the patient has no preference in health care providers, the IHS facility may make a recommendation to the patient which, for home care or hospice patients, may include an IHS home care provider or hospice.

1.1.7 This policy does not apply to services provided to patients while an inpatient or to durable medical equipment, palliative care, or outpatient infusion services. For durable medical equipment, palliative care, and outpatient infusion services, the IHS facility may, but is not required by law to, provide the patient with a list or brochures of health care providers in the community who provide the type of service needed by the patient.

2. MRI, CT, or PET Scans in Physician Clinic. If a physician refers a patient for a MRI, CT, or PET scan offered by the physician’s practice and the scan will be billed by the physician or the physician’s practice using the in-office ancillary exception to the Stark Law, the physician and/or clinic must provide notice to the patient of alternative area suppliers for the imaging services.

2.1 Written disclosure must be made to the patient by the referring physician at the time of referral for each imaging service.

2.2 The written disclosure should notify the patient that he or she may obtain the imaging service somewhere other than from the physician practice.

2.3 The disclosure must include a list of suppliers (MRI, CT, and PET) within a 25-mile radius of the physician’s office location.

2.3.1 The number of suppliers listed must be at least five, except where fewer than five exist within that geographic range.

2.3.2 The list may, but is not required to, include other providers, such as nearby hospitals. However, while hospitals can be added to the list, they cannot substitute for other suppliers.
2.3.3 If no alternative suppliers exist within the 25-mile radius, the physician and/or practice must still disclose to the patient that he or she may receive the service elsewhere.

2.3.4 The name, address, and phone number of each alternative supplier must be listed.

2.3.5 The list of alternative suppliers should be updated annually to ensure it is reasonably current and accurate.

2.4 The disclosure notice should be written in a manner sufficient to be “reasonably understood by all patients.”

2.5 The physician clinic shall document in the chart or another manner that notice was given to the patient.

2.6 Questions regarding billing under the Stark Law in-office ancillary exception should be referred to the Law Department.

/s/ William B. Leaver

William B. Leaver
IHS President

REFERENCES: 42 C.F.R. 482.43; Social Security Act, §1861(ee)