

Can PRC pay for your referral medical care? Find out in 3 stages.

Individual Qualifications

Stage 1

You are eligible if:

a) You are a member or descendant of a California Federally recognized Tribe

and

b) You live on the reservation or you live in the K'ima:w Medical Center Service Area*

**If you have questions about the Service Area, please contact your local PRC Department.*

and

c) You get prior approval for each case of needed medical service or give notice within 72 hours in emergency cases (30 days for elders & disabled)

No

for the above

Application is denied.

* There are a few narrowly defined exceptions. Ask PRC staff for more specifics about individual eligibility, PRCD, or prior notice.

Relative Medical Priorities

Stage 2

Payment may be approved if:

a) The health care service that you need is medically necessary
– as indicated by medical documentation provided

and

b) The service is not available at an accessible IHS or Tribal facility

and

c) The facility's PRC committee determines that your case is within the current medical priorities of the facility

*Unfortunately, PRC funds often are not sufficient to pay for all needed services. When this happens, the committee considers each individual's medical condition to rank cases in relative medical priority. Cases with imminent threats to life, limb, or senses are ranked highest in priority. ***

and

d) PRC funds available are sufficient to pay for the service to be authorized

No

for the above

Application is deferred.

** Ask PRC staff for more specifics. Sometimes deferred lower priority cases may be reconsidered later if funding permits.

Coordination and Payment

Stage 3

Referral Authorization:

a) You must apply for any alternate resources for which you may be eligible
– Medicare, Medicaid, insurance, etc.

then

b) A Referral order is issued to a provider authorizing payment for services

then

c) Clinical and PRC staff work with the authorized provider to coordinate your medical care

then

Billing
d) The authorized submits a claim and medical chart notes to PRC for payment to your alternate resource for payment.

then

Payment
e) The authorized provider bills any unpaid balance to PRC for payment
– because PRC is payer of last resort, it pays only for costs not paid by your alternate resources and approved by PRC

Steps are completed in order

Provider is paid.

Specific services authorized within relative medical priorities may vary from time-to-time in response to changing supply and demand, especially to stretch diminished funds over the remainder of the fiscal year.