

**NEWS from the North Dakota Department of Human Services  
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## **Human Services announces Great Plains Area Indian Health Services signs care coordination agreements with two North Dakota Medicaid providers**

BISMARCK, N.D. – The North Dakota Department of Human Services today announced that the Great Plains Area Indian Health Services (IHS) has signed care coordination agreements with Catholic Health Initiatives (CHI) St. Alexius Health and Sanford Health. The signed agreements allow the department to reduce the state's general fund expenditures for medical services delivered to Medicaid-eligible Native American recipients who are referred by IHS to either CHI St. Alexius Health or Sanford Health for care.

"The signed agreements are the first in an expected wave to enhance service referrals for Medicaid-eligible Native American recipients receiving care through IHS, thereby increasing access to care, strengthening continuity of care and improving their overall health," said Maggie Anderson, the department's Medicaid director.

By having care coordination agreements, IHS and non-IHS health care providers work together to improve timeliness and quality of care through an IHS practitioner who initiates requests for services outside their facility's capacity. The results of the recipient's medical care are shared with the IHS practitioner who continues to coordinate the individual's care.

Anderson said the department is working on various ideas to address extra costs incurred by IHS and tribal health care to complete the care coordination activities.

The recently signed care coordination agreements result from a collaborative effort involving the department, Great Plains Area IHS, Standing Rock IHS, Standing Rock Sioux Tribe, Sanford Health, CHI St. Alexius Health, the North Dakota Hospital Association and the North Dakota Indian Affairs Commission.

Department officials continue to meet with North Dakota IHS tribal health care providers and North Dakota tribes to plan for implementing additional care coordination agreements. Future plans include expansion of care coordination agreements among other Medicaid-enrolled providers resulting in statewide coordinated care for Medicaid-eligible Native American recipients.

The Great Plains Area office is located in Aberdeen, S.D., and works in conjunction with its 19 IHS units and tribal managed service units to provide health care to approximately 130,000 Native Americans living in North Dakota, South Dakota, Nebraska and Iowa.

In 2016, the federal Centers for Medicare and Medicaid Services updated policy to allow states to receive enhanced federal match at a rate of 100 percent Federal Medicaid Assistance Percentage (FMAP), which reduces state expenditures when care coordination agreements are in place. The 2017 North Dakota Legislature included the authority in the department's legislatively-approved budget to facilitate conversations between IHS tribal health care and non-tribal Medicaid-enrolled providers to explore care coordination agreements.

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