

EBCI Tribal Option
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Together We Heal



The Mission of the Cherokee Indian Hospital is to be the provider of choice for the community by providing accessible, patient and family centered quality healthcare with responsible management of the Tribes resources.

TITLE: EBCI Tribal Option Primary Care Provider Contracting and Monitoring Policy

REVIEWED AND APPROVED BY: CIHA Executive Committee

EFFECTIVE DATE: 2/18/2021

LAST REVIEWED: 8/17/2023

POLICY OWNER: EBCI Tribal Option Provider Network Manager

PURPOSE:

The purpose of this Policy is to establish criteria for the enrollment, monitoring, and termination of primary care providers (PCPs) or PCP Practices in the Eastern Band of Cherokee Indians (EBCI) Tribal Option to ensure that the EBCI Tribal Option Members have a robust network of PCPs to meet their needs with quality services.

Cherokee Indian Hospital Authority (CIHA) and its division the EBCI Tribal Option create an environment that aligns with the Core Purpose, Mission, Vision, and Guiding Principles of CIHA. The objective of this Policy is to ensure that Guiding Principle Four's, **di qua tse li i yu sdi** ("Like Family to Me") philosophy is articulated by providers when delivering care to EBCI Tribal Option Members. CIHA and EBCI Tribal Option believe that all health care services belong to the people and that the EBCI Tribal Option is a steward of this health care, safeguarding it and providing it to Members when and how they need it.

EBCI Tribal Option, a Primary Care Case Management (PCCM) Program and a North Carolina (NC) Medicaid Managed Care Entity, must adopt a PCP contracting policy as required by the North Carolina Department of Health and Human Services (NCDHHS) Indian Managed Care

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Entity Contract (IMCE). The EBCI Tribal Option Provider Network consists of tribal and non-tribal providers.

STAFF GOVERNED BY THIS POLICY:

This Policy applies to all:

- CIHA Executive staff;
- EBCI Tribal Option staff;
- EBCI Tribal Option Provider Network.

POLICY:

EBCI Tribal Option shall abide by the following policy while enrolling, monitoring, and terminating PCPs or PCP Practices in the EBCI Tribal Option Provider Network:

Enrollment of PCPs

EBCI Tribal Option enrolls PCPs through contracts with PCPs or a PCP's group practice (PCP Practice) which meet all the requirements of NCDHHS and EBCI Tribal Option, including, but not limited to:

- a. Being located within the EBCI Tribal Option Service Area, which consists of Cherokee, Graham, Haywood, Jackson, and Swain counties or within a reasonable distance of CIHA;
- b. Being enrolled in NC Medicaid and being enrolled as a Carolina Access provider or Advanced Medical Home (AMH) provider and providing primary and preventative services as defined in Medicaid policy;
- c. Not being debarred, excluded, suspended, or otherwise ineligible to participate in any federal or state health care program;
- d. Not having their license terminated, suspended, restricted, or reduced in any manner;
- e. Not being suspended or otherwise barred from participation in any state or federal health care program;
- f. Not having plead guilty or no contest to or have not been convicted of a criminal offense related to the provision of health care items or services;
- g. Not being the subject of disciplinary action by any state or federal body or agency;
- h. Not being the subject of any administrative, judicial, or other proceeding action or settlement involving the alleged violation of a state or federal health care fraud and abuse or Member safety law, rule, or regulation;
- i. Not having filed a petition for bankruptcy or insolvency and not having had an involuntary petition filed against the PCP or the PCP Practice;
- j. Having interpretation services available to all Members, which includes oral interpretation and the use of auxiliary aids, such as TeleTYpe/Telecommunications Device for the Deaf (TTY/TDD) and American Sign Language. Oral interpretation requirements apply to all non-English languages, not just those that NCDHHS identifies as prevalent; and
- k. Maintaining at least thirty (30) office hours per week to provide direct patient care.

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Monitoring of PCPs

EBCI Tribal Option continually monitors the performance of the PCPs and PCP Practices to ensure that they are doing the following:

- a. Meeting the requirements of the EBCI Tribal Option Contract, policies, and procedures;
- b. Providing quality care to the Members, and
- c. Meeting Member's needs.

The monitoring will include a review of the PCP's medical records, service utilization from claims submission, Member grievances, performance measures, population health initiatives, and issues raised during Provider Council meetings or obtained from Member Surveys and Provider Surveys.

Termination of PCPs

EBCI Tribal Option may terminate a PCP or PCP Practice's enrollment under the following conditions:

- a. An enrolled PCP or PCP Practice will be terminated immediately upon:
 - i. Termination of the NCDHHS/EBCI Tribal Option Contract, or
 - ii. Failure to meet any of the requirements listed previously in the "Enrollment of PCPs" section of this Policy.

Upon any of these occurrences with a PCP Practice's particular provider, EBCI Tribal Option may exclude that provider from participating in the EBCI Tribal Option, while allowing the PCP Practice and its remaining providers to continue their participation;

- b. An enrolled PCP or PCP Practice may be terminated if failure to do the following occurs:
 - i. Comply with the EBCI Tribal Option policies, procedures, and reporting requirements;
 - ii. Identify and work on improvement opportunities to achieve the performance measures and EBCI Tribal Option Program goals, or
 - iii. Comply with the EBCI Tribal Option Care Management staff requests within fourteen (14) calendar days of each request;
- c. The EBCI Tribal Option or the enrolled PCP or PCP Practice may terminate their participation:
 - i. For cause with at least a thirty (30) calendar day notice in writing;
 - ii. Without cause and for any reason upon a ninety (90) calendar day written notice, or
 - iii. By mutual consent.

DEFINITIONS:

Advanced Medical Home (AMH)

Care management that happens by a primary care office. The primary care practice and the care management model must meet certain criteria to qualify as an AMH and agree to regular reporting and quality measures. The AMH is offered as a benefit under the Medicaid Standard Plans (SPs).

The AMH program requires prepaid health plans (PHPs) to delegate certain care management functions to AMHs at the local level. In order to provide these care management functions, AMHs

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may work with their affiliated health care system or make an arrangement with an entity called a Clinically Integrated Network, a Care Management vendor, or other population health entity.

AMH practices can also include physician assistants, advanced practice nursing providers, and certain ambulatory health care facilities.

Advanced Medical Home Plus (AMH+)

AMH+ practices will be PCP practices actively serving as AMH Tier 3 practices, whose providers have experience delivering primary care services to the Behavioral Health and Intellectual/Developmental Disability (BH I/DD) Tailored Plan eligible population or can otherwise demonstrate strong competency in providing integrated, whole-person care management to serve that population through additional care management responsibilities and quality measure. The AMH+ designation will be unique to practices serving the BH I/DD Tailored Plan population and will be responsible for providing care management, in compliance with the AMH+ NCDHHS certification requirements to their assigned populations.

Care Management Agency (CMA)

Behavioral Health and Intellectual/Developmental Disability BH I/DD provider organizations with experience delivering BH, I/DD, and/or Traumatic Brain Injury (TBI) services and supports to the BH I/DD Tailored Plan eligible population, that will hold primary responsibility for providing integrated, whole-person care management under the Tailored Care Management model. The “CMA” designation will be unique to providers serving the BH I/DD Tailored Plan population and must meet NCDHHS CMA certification requirements.

Cherokee Indian Hospital Authority (CIHA):

An independent component unit of the Eastern Band of Cherokee Indians tribal government to oversee, supervise, and direct the operations of the Cherokee Indian Hospital and other health programs assigned to CIHA by the EBCI Tribal Council.

EBCI Tribal Option

The unit within CIHA that is responsible for managing the Indian Managed Care Entity and serves as the point of contact with the Division of Health Benefits, within the NC Department of Health and Human Services.

EBCI Tribal Option Contract

The Indian Managed Care Entity Contract #30-2020-014-DHB between the North Carolina Department of Health and Human Services, Division of Health Benefits and Cherokee Indian Hospital Authority. Subsequent revisions and amendments are also included in this definition. This Contract is also referred to as the NCDHHS/EBCI Tribal Option Contract.

EBCI Tribal Option PCCM Entity

The program defined in the State Plan of North Carolina, administered by the North Carolina Department of Health and Human Services, Division of Health Benefits, and operated by CIHA

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under the NCDHHS/EBCI Tribal Option Contract, for providing Care Management support and other managed care functions to Medicaid populations using a Medical Home/Care Management model. This Program is referred to as the EBCI Tribal Option.

EBCI Tribal Option Provider Network

Primary Care Provider (PCP) practices with whom the EBCI Tribal Option has enrolled into the Network through the execution of the PCP contract. CIHA Primary Care and satellite clinics are part of the EBCI Tribal Option Provider Network.

Indian Health Care Provider (IHCP)

Has the same meaning as IHCP as defined by 42 C.F.R. § 438.14(a).

Member

Beneficiaries enrolled in and receiving Medicaid Benefits through the EBCI Tribal Option PCCM Entity or other Medicaid managed care health plans.

Network Primary Care Provider (PCP)

Any PCP contracted with the EBCI Tribal Option PCCM Entity to deliver care coordination services to Members. The Network PCP is selected by or assigned to the Member to provide both sick care and well care at the Member’s medical home and to initiate and monitor referrals for specialized services when required.

North Carolina Department of Health and Human Services (NCDHHS)

A Department within the North Carolina Executive Branch that is the designated single state agency with the US Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) for the administration of the Medicaid Program through the Division of Health Benefits.

Primary Care Case Management (PCCM) Entity

An organization that provides any of the following functions, in addition to PCCM services, for NCDHHS:

- Provision of intensive telephonic or face-to-face case management, including operation of a nurse triage advice line;
- Development of Member Care Plans;
- Execution of contracts with and/or oversight responsibilities for the activities of Fee-For-Service (FFS) providers in the FFS Program;
- Provision of payments to FFS providers on behalf of NCDHHS;
- Provision of Member outreach and education activities;
- Operation of a customer service call center;
- Review of provider claims, utilization and practice patterns to conduct provider profiling, and/or practice improvement;
- Implementation of Quality Improvement (QI) activities, including administering Member satisfaction surveys or collecting data necessary for performance measurement of providers;

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- Coordination with behavioral health systems/providers;
- Coordination with Long-Term Services and Supports (LTSS) systems/providers.

Primary Care Provider (PCP)

A PCP is a specialist in Family Medicine, Internal Medicine, or Pediatrics, who provides definitive care to the undifferentiated patient at the first point of contact and takes continuing responsibility for providing the patient comprehensive care. This care may include chronic, preventive, and acute care in both inpatient and outpatient settings.

Primary Care Provider (PCP) Practice

Two or more primary care providers (PCPs) who practice medicine within a group practice or setting under a single legal entity.

PROCEDURE:

EBCI Tribal Option shall abide by the following procedures while enrolling, monitoring, and terminating PCPs and PCP Practices in the EBCI Tribal Option Provider Network.

Enrollment of PCPs

EBCI Tribal Option is made aware of any new PCPs offering services in the EBCI Tribal Option Service Area or any established PCPs who express interest in joining the EBCI Tribal Option Provider Network or expanding service locations. The Provider Network Manager will schedule and hold meetings to discuss and address the following with the newly identified PCP:

- a. Communicate the mission, vision, and goals of the EBCI Tribal Option;
- b. Review the roles and responsibilities of the PCPs, EBCI Tribal Option, and Members;
- c. Answer questions from the PCP;
- d. Review the EBCI Tribal Option PCP contract terms, and
- e. Complete the EBCI Tribal Option PCP Application Form.

Once the PCP Application Form is completed, EBCI Tribal Option will confirm that the PCP and the PCP Practice meet all the requirements of the EBCI Tribal Option and validate that the PCP and the PCP Practice are not on any of the following exclusion lists:

- NCDHHS Excluded Provider List;
- U.S. Department of Health and Human Services, Office of Inspector General’s (HHS-OIG) List of Excluded Individuals/Entities (LEIE);
- The System for Award Management (SAM);
- The Social Security Administration Death Master File (SSADMF);
- To the extent applicable, National Plan and Provider Enumeration System (NPPES), and
- Office of Foreign Assets Control (OFAC).

Upon a determination that the PCP and PCP Practice meet all the requirements and are not on an exclusion list, EBCI Tribal Option will enter into an NCDHHS-approved contract with the PCP or PCP Practice that includes the roles and responsibilities of the PCP, PCP Practice, and EBCI Tribal Option.

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Upon execution of the PCP contract, EBCI Tribal Option will officially enroll the PCP into the Program, direct them to the EBCI Tribal Option website at www.ebcitribaloption.com to access the Provider Manual or upon request provide them a paper copy of the Manual, and add them to the EBCI Tribal Option Provider Directory. The Provider Directory will include each PCP's:

- Name and gender;
- Doing business as (DBA) name;
- Address;
- Group affiliations;
- County served;
- Hours;
- Phone number;
- After-hours phone number;
- Website uniform resource locator (URL);
- Service limitations;
- Whether new Members are currently being accepted;
- Language capabilities;
- Cultural sensitivity training;
- Office accessibility;
- Whether the PCP or PCP Practice is an Indian Health Care Provider (IHCP).

The Provider Directory will be posted on the EBCI Tribal Option website and will be available in hard copies without charge upon request and if requested, is provided within five (5) CIHA business days. The Directory will be updated regularly as PCP information changes and as new PCPs are enrolled or existing PCPs are disenrolled from the EBCI Tribal Option. This information will be submitted to NCDHHS as required by the NCDHHS/EBCI Tribal Option Contract.

Upon execution of the PCP contract, EBCI Tribal Option will provide training and technical assistance to participating PCPs. The training will include:

- a. PCP, PCP Practice, and EBCI Tribal Option roles and responsibilities;
- b. Reporting requirements;
- c. The history, evolution, and work culture of EBCI Tribal Option;
- d. Standards of care, and
- e. The role of the EBCI Tribal Option in the PCP's AMH model.

Each PCP or PCP Practice will identify a key contact person who will be vital in the training and education sessions, ensuring that the PCP or PCP Practice understands their role.

In addition to the development of the Provider Network, EBCI Tribal Option also identifies and embraces community-based organizations (CBOs) within the region, including support groups that serve community needs (such as housing, meal assistance, etc.). EBCI Tribal Option provides access to listings of CBOs that are available to Members and PCPs through the EBCI Tribal Option website in the "For Members" section listed as "local tribal resources" and in the "For Members-

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Health Promotion and Education” section listed as “a few of our community partners.” These CBOs are critical components in supporting the PCPs in meeting the needs of their Members.

Monitoring of PCPs

Monitoring of PCPs will occur in order to maintain close collaboration and cooperation with PCPs to ensure that the goals of the EBCI Tribal Option are met. There shall be continual bilateral flow of information between EBCI Tribal Option and the PCPs.

EBCI Tribal Option retains the right to periodically monitor a PCP’s Members’ information and medical records. Additionally, it may be necessary to review a PCP’s performance relevant to that of the EBCI Tribal Option’s goals and objectives and other reasonable, necessary, and appropriate purposes, while in accordance with applicable state, federal, and tribal laws.

To continually enhance services and provide quality care to the Members, EBCI Tribal Option will focus on key performance measures and population health initiatives by monitoring and measuring Member data from the PCPs. EBCI Tribal Option will collect and collate Member data from each PCP to assess performance as outlined in the EBCI Tribal Option Quality Improvement Plan. On at least an annual basis, EBCI Tribal Option will prepare Provider Performance Reports for the PCPs that provide a snapshot into how they are performing in specified areas among their Network peers, while maintaining full compliance with all anti-trust requirements. The reports may include performance data related to accessibility, quality improvement activities, and various other measures. The data is for informational purposes and may assist the health care provider in improving internal processes, such as data collection and validation. The Quality Improvement Committee will monitor progress in meeting quality improvement goals and adherence to key performance indicators.

EBCI Tribal Option will share the results of each Member’s Comprehensive Assessment with the appropriate PCP within fourteen (14) calendar days of completion of the Assessment to inform the PCP about care planning and treatment planning, with Member consent to the extent required by law. In addition, EBCI Tribal Option will share the results of each Member’s Care Needs Screening with the appropriate PCP within seven (7) calendar days of screening or within seven (7) calendar days of assignment to the PCP, whichever is earlier. EBCI Tribal Option will monitor each PCP’s performance and health care utilization reports generated from administrative, care management, and chart data to identify and address any non-compliance with standards.

EBCI Tribal Option will meet with each PCP or PCP Practice or provide information, as needed and as requested, via a Web bulletin or an email, instructing the PCP or PCP Practice to do the following:

- a. Provide ongoing training and technical assistance;
- b. Review the PCP’s Member data as benchmarked against the Provider Network;
- c. Review any upcoming changes to performance expectations or EBCI Tribal Option Program changes;
- d. Resolve any PCP, PCP Practice, or Member grievances;

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- e. Review data from Provider Survey; and
- f. Address any questions and concerns.

These meetings will be held at least annually or at any time upon request by a PCP, a PCP Practice, or EBCI Tribal Option.

EBCI Tribal Option maintains a Provider Council composed of representatives from the regional PCPs to address any issues and concerns and provide feedback and recommendations to make the Program more efficient and valuable to Members, PCPs, and PCP Practices. Each year, EBCI Tribal Option will conduct a Provider Survey to identify the PCP's and PCP Practices' level of satisfaction with the Program and to identify any issues and concerns. In addition, EBCI Tribal Option will conduct Member Surveys to assess Members' satisfaction with their PCP. If, in either Survey, an issue(s) is raised about a particular PCP or PCP Practice, EBCI Tribal Option will meet with the PCP or PCP Practice to discuss the issue(s) and reach a resolution for correction.

Termination of PCPs

On a monthly basis, EBCI Tribal Option shall check the exclusion status of PCPs against the exclusion lists. Upon identification that a PCP or PCP Practice appears on an exclusion list, EBCI Tribal Option shall:

- a. Take appropriate action against the PCP or PCP Practice, which may include termination; and
- b. Report the following:
 - i. PCP's and/or PCP Practice's name to NCDHHS within two (2) CIHA business days;
 - ii. Amounts paid to the PCP and/or PCP Practice over the previous twelve (12) months;
 - iii. National Provider Identifier (NPI) of the PCP and/or PCP Practice, and
 - iv. Name of the list where the exclusion appeared.

NCDHHS will notify EBCI Tribal Option within five (5) State business days if any adverse action is taken against the PCP or PCP Practice and what EBCI Tribal Option's responsibility is as a result of the adverse action.

PCPs and PCP Practices are required to immediately notify EBCI Tribal Option upon any change in their initial application form, including any change in their attestations. Upon notification from NCDHHS, a PCP, PCP Practice, or other source of a PCP's change in status that disqualifies them from participation and requires termination of enrollment, EBCI Tribal Option will immediately terminate the contract with the PCP or PCP Practice. If NCDHHS notifies EBCI Tribal Option that a PCP or PCP Practice is terminated as a Medicaid provider within one (1) CIHA business day upon receipt of the notice, EBCI Tribal Option will remove the PCP or PCP Practice from its Network effective on the date NCDHHS provides.

If a PCP fails to do the following, EBCI Tribal Option shall meet with the PCP or PCP Practice to discuss the problem and develop a plan of action for compliance:

- Comply with EBCI Tribal Option policies, procedures, and reporting;

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- Participate in performance measures or population health initiatives, or
- Comply with requests for Member records or Member data.

If after a PCP or PCP Practice repeatedly fails to comply, EBCI Tribal Option may terminate the PCP or PCP Practice from enrollment in the EBCI Tribal Option.

If the reason for termination only applies to a particular PCP in the PCP Practice, EBCI Tribal Option may exclude only that particular PCP from participating in the EBCI Tribal Option, while allowing the PCP Practice and its remaining PCPs to continue their participation.

If a decision is made to terminate a PCP or PCP Practice from the EBCI Tribal Option, the following shall be done:

- a. EBCI Tribal Option must provide written notice to the PCP or PCP Practice of the decision to terminate, including the reason for the EBCI Tribal Option's decision and the effective date of the decision;
- b. EBCI Tribal Option shall report information to NCDHHS about any terminated PCPs on a monthly basis;
- c. EBCI Tribal Option will notify Members who were assigned to the terminated PCP or PCP Practice and in a good faith effort provide Members written notification within seven (7) calendar days after receipt of a notice of termination by NCDHHS or issuance of termination notice to the PCP or PCP Practice by EBCI Tribal Option. The notice shall explain how to select a new PCP or be auto-assigned if no selection is made and will describe the efforts which will be used to support the Member's transition of care to a new PCP;
- d. The PCP or PCP Practice shall continue its obligations to transition any administrative duties and records to NCDHHS, EBCI Tribal Option, or designees from either.

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**EBCI TRIBAL OPTION PRIMARY CARE PROVIDER CONTRACTING AND MONITORING POLICY:
POLICY IMPLEMENTATION/REVISION INFORMATION**

Original Effective Date: 2/18/2021

Revision Information:

Date	Section Updated	Change
3/18/2022	Policy Header	Added “Last Reviewed” date and added “CIHA” to Executive Committee title
3/18/2022	All sections	Checked and amended grammar, numbering, and readability as needed
3/18/2022	All sections	Added “PCP Practice” to differentiate from a primary care provider (PCP)
3/18/2022	All sections	Changed all instances of “patient” to “Member”
3/18/2022	Policy	Added the language “through contracts with PCPs or a PCP Practice” as part of the process for enrolling PCPs
3/18/2022	Policy	Added “AMH+” as a type of provider requirement for PCPs enrolling in the EBCI Tribal Option
3/18/2022	Policy	Added “calendar” to specify what type of days
3/18/2022	Definition	Added a definitions section and added relevant definitions
3/18/2022	Procedure	Deleted first paragraph which detailed enrollment procedure prior to the launch of EBCI Tribal Option
3/18/2022	Procedure	Added language about “established PCPs who express interest in joining the EBCI Tribal Option Provider Network or expand service locations” who offer new PCP services in the EBCI Tribal Option Service Area
3/18/2022	Procedure	Changed the language from “Once a practice signs the PCP contract” to “Upon execution of the PCP contract” in regard to when EBCI Tribal Option officially enrolls the PCP into the Program and directs them to the Provider Manual and the EBCI Tribal Option Provider Directory

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Policy Implementation/Revision Information**

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3/18/2022	Procedure	Supplemented the Provider Directory list with items each provider offers
3/18/2022	Procedure	Changed the language from “Prior to the implementation of the program” to “Upon execution of the PCP contract” for when EBCI Tribal Option provides training and technical assistance to participating PCPs
3/18/2022	Procedure	Included directions on where to access CBOs on EBCI Tribal Option website
3/18/2022	Procedure	Added “while maintaining full compliance with all anti-trust requirements” when describing how EBCI Tribal Option will prepare quarterly Provider Performance Reports for the PCPs
3/18/2022	Policy Implementation/ Revision Information	Added policy revision information table
8/17/2023	Policy Heading	Added Cherokee translation and syllabary for “EBCI Tribal Option”
8/17/2023	Policy Header	Amended the “Last Reviewed” date and added “Policy Owner” and identified the role
8/17/2023	All Sections	Checked and amended grammar, numbering, and readability as needed
8/17/2023	All Sections	Identified “Network” as “Provider Network” and changed all instances of “PCP Network” to “Provider Network”
8/17/2023	Staff Governed By This Section	Updated the “Staff Governed By” section with the appropriate parties
8/17/2023	Policy	In the “Enrollment of PCPs” section, deleted “AMH+” from item b. and added the sentence “Oral interpretation requirements apply to all non-English languages, not just those that NCDHHS identifies as prevalent” to item j.; Supplemented item k. with “to provide direct patient care” for Providers having to maintain at least 30 office hours per week
8/17/2023	Definitions	Amended “AMH+,” “CMA,” “CIHA,” “EBCI Tribal Option,” EBCI Tribal Option PCCM Entity,” EBCI Tribal Option Provider Network,” “Member,” and “PCCM Entity” definitions

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8/17/2023	Procedure	Added that the Provider Directory can be requested “without charge” and “if requested, is provided within 5 CIHA business days.” Added that any changes to the Directory “will be submitted to NCDHHS as required by the NCDHHS/EBCI Tribal Option Contract”
8/17/2023	Procedure	Deleted any text that was redundant
8/17/2023	Procedure	Changed the cadence for EBCI Tribal Option preparing Provider Performance Reports for the PCPS to “on at least an annual basis” instead of “quarterly”
8/17/2023	Procedure	Added” with Member consent to the extent required by law” when EBCI Tribal Option shares the results of the Member’s CA with the appropriate CA
8/17/2023	Procedure	Added “Review data from Provider Survey” as a bullet item for a PCP or a PCP Practice to do when EBCI Tribal Options meets with each PCP or PCP Practice or provides information
8/17/2023	Procedure	Changed “will” to “must” and identified the notice as “written” when EBCI Tribal Option must provide written notice to the PCP or PCP Practice of the decision to terminate

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