

Navarro County Indigent Policy and Procedures

Purpose: The purpose of this policy is to establish a minimum eligibility standard, application, documentation, and verification procedure for Navarro County Indigent Health Care Program.

Application Process: All applications must have sufficient information to identify the applicant, including but not limited to: name, address, phone number, social security number, and signature of the applicant. Applications will be date stamped on the date received. If required information does not provide sufficient information, it will be date stamped the date received and mailed back to the applicant. With the identifiable application, check for prior accounts, if none, check rapid registration and hospital notification. Assign a client number using rapid registration if available. Set appointments 14 days out if mailing the F3067 and F3068. If handing in the forms, the first available can be used. Reschedules are permitted but be attentive to the age of the application. Once interviewed, allow 14 days to provide pending information. Deny on the 15th day if no information has been received. Complete the case within 14 days once all information has been received.

Documentation: Documentation is important to justify your decision on the case. Please document household compensation, income, resources, and management. Also, document if the client will participate in the work registration or if they are exempted and why. If Social Security Disability has been pursued, what is the status of the claim? Please see the work registration policy.

Verification: Verification can be written or verbal. If possible, reach out to sources for verification to complete the case in a timely manner. Identification can be any state issued license or identification card. This doesn't verify their residence, just who they are. If there is no State ID available, 3 other forms of ID will be accepted. Examples: school records, mail, church records, social security card, offender card, homeless shelter card, work badge, etc. Use your discretion. If you question who they are, do not accept. CIHCP cannot require someone to pay for a state issued ID.

Income eligibility: Navarro County Indigent Health Care will use the 21 percent of the federal poverty level to determine eligibility.

Services: Navarro County will provide Basic Health Care Services to eligible Navarro County residents through approved Primary care offices within Navarro County. The Indigent Health Care Program will allow \$30,000 max for each fiscal year (09/01 to 08/31 the following year). This will cover Basic Health Services such as, primary and preventative services, lab and x-rays, immunizations, specialists with approved referral if medically necessary, medical screening services, annual physical examinations, and inpatient and outpatient hospital services. Other medical necessary services may be determined by your primary care provider with an approved authorization referral. It also covers 3 prescriptions per month no more than \$500 each (Generic ONLY) unless generic is not available for the prescription ordered. IHCP does not cover over-the-counter medications.

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Referrals and notification of services: Clients will receive medical care through their choice of an approved primary care office within Navarro County. If a specialist is needed, their primary care physician (PCP) will send a request to the Navarro County Indigent Health Care Office for a determination. Once a determination is made the Navarro County Indigent Health Care Office will send the decision to the patients PCP and to the patient. This is done prior to any services provided by the specialist. The client is responsible for all bills if the referral process is not followed, and Navarro County will not pay for the services. Hospitals, such as emergency services or inpatient services must notify the Navarro County Indigent Health Care Office verbally within 72 hours of admit and a written notification within 5 days of admit. If the notification is not done in a timely manner, the county is not responsible for paying for the services.

Changes: Clients are required to report all changes within 14 days of the change. Process the change within 14 days, per section 3, page 6 of case record maintenance, the effective date is the date the F117 is issued to the household.

Processing appeals: All appeals will be processed by the Coordinator. Per section 3, Case Processing, page 5, if a denial decision is disputed by the household, the household may submit another application, the household may appeal the denial, or the county may choose to re-open the denied application. The client has 30 days to request an appeal via phone, in writing or in person. Once an appeal is received, the Coordinator will review the complete case to validate the decision. Once the decision is made, the client will be notified in writing of the decision. If the denial is not valid, the case will be reopened within 10 days and the effective date is the first day of the month of the identifiable application. If there is still a dispute, the case will be submitted to the County Judge for a final decision. The County Judge will have 45 days to make the final decision. The client will then be notified in writing of the Judge's decision.

Reports: A monthly financial report (Form 3072) will be submitted no later than the 10th day of the following month. The report will be emailed to CIHCP@hhsc.state.tx.us. An end of year report is to be completed at the end of each state fiscal year (after August 31). This is to be completed on a Form 3086 and sent to HHSC CIHCP at 512-776-7203 no later than September 30. All invoices that are received will be processed through Indigent Health Solutions, known as (IHS). The IHS site has all the standard deductions, Medicaid rates, Hospital Inpatient and Outpatient percentages etc. already pre-programmed. Invoices/ Claims that are received will be imported into the IHS, that will fall into a certain batch based on date of entry, that will be included in the next upcoming commissioner court date. The Wednesday prior to the next commissioner court date all invoices for that period will be entered.

(Example: data entry dates 08/08/24 to 08/21/24 will be processed and ready for the next commissioner court date on 08/26/24).

Behavior: Clients are required to comply with all State, Navarro County, PCP and other Medical Providers behavioral guidelines. If you display disruptive or abusive language or behavior you may NOT receive services. Our staff will be protected from dangerous situations. Physical or combative confrontations are grounds for immediate suspension from the Navarro County Indigent Healthcare Program. Clients that apply for the Navarro County Indigent Healthcare Program are required to sign & date the Behavioral Policy that is attached in the Indigent application.

Employment: Eligible clients that are not exempt from the work registration are required to complete a monthly work search (8 job searches) each month. This is required in order to maintain Indigent benefits during the clients 6-month period. Failure to comply with the work policy will cause a disqualification period of 3 months. Terminating employment solely for the purpose of becoming eligible for Indigent Health Care may cause disqualification from the program for a period of 6 months. Clients that apply for the Navarro County Indigent Healthcare Program are required to sign & date the Work Registration Policy that is attached to the Indigent application.

Work Registration Requirements

Navarro County, Texas has adopted the following as the Work Registration Policy for the Indigent Health Care Program.

General Provisions:

1. Failure to register and actively seek employment through the Texas Workforce Commission constitutes a program violation of the Indigent Health Care Program.
2. Persons are exempt from having to register and seek employment if they meet one of the following criteria:
 - Receive unemployment insurance benefits or have applied but not yet been notified of eligibility.
 - Physically or mentally unfit for employment, a statement from your primary care physician (Dr. Kent E. Rogers Clinic) is required.
 - Undocumented alien
 - Age 60 or older
 - Participates in an outpatient substance abuse treatment and rehabilitation program who are not allowed to seek employment while in treatment.
 - Full time student participating in a work study program.
 - Employed or self-employed 20 hours per week or receive earnings at 20 hours per week at federal minimum wage (20hours x \$7.25).
3. Job searches must be within your experience and qualifications. Searches not within your qualifications will not be considered a good faith effort to actively seek employment.

Consequences:

1. If a non-exempt applicant or CIHCP eligible resident fails without good cause to comply with the work registration requirements he/she will be disqualified from the County Indigent Health Care Program for a period of 3 months.
2. Persons deemed not disabled by Social Security Administration guidelines at the hearing level will be required to seek employment.
3. Terminating employment solely for the purpose of becoming eligible for Indigent Health Care may cause disqualification from the program for a period of 6 months.

Job searches will be randomly checked to validate our program's participation. I hereby acknowledge that I have read, understand, and agree to the provisions of the foregoing policy.

Signature

Date



Indigent Healthcare Behavioral Policy

- You are required to comply with all State, County and Medical provider policies and guidelines to receive services through the Navarro County Indigent Healthcare Program.
- You are required to comply with all behavioral guidelines established by the State of Texas, Navarro County, Your PCP office, and any other provider with which you are referred.
- If you display disruptive or abusive language or behavior you may NOT receive services. Our staff will be protected from dangerous situations. Physical or combative confrontations are grounds for immediate suspension from the Navarro County Indigent Healthcare Program.
- You are expected to comply with the medical recommendations as set forth by your PCP and by any other provider to whom you are referred. Non-compliance may be grounds for suspensions from the Navarro County Indigent Healthcare Program.
- You are expected to give any providers (example: Navarro County Indigent Healthcare Coordinators, PCP, Specialists, Hospitals, Clinics & etc.) **AT LEAST 48 hours advance notice** when cancelling an appointment or if you are unable to keep the appointment. You will **NOT** be rescheduled for appointments when you have **failed to keep** two or more scheduled appointments. *Their time and ours is valuable, as is yours!*

I have read, understand, and agree to the provisions of the foregoing policy:

Client Signature

____/____/____

Date

Navarro County Indigent Healthcare Program Staff

____/____/____

Date