FEDERAL MEDICAL CARE RECOVERY ACT (FMCRA)

Presented by

Sue Bear Rollice, RHIA, CCS
Oklahoma Area FMCRA Coordinator
Oklahoma Area Deputy Business Office
Coordinator

TRADITIONAL REVENUE AVENUES

- Medicare
- Medicaid
- Private insurance
- Workman's compensation
- Nonbeneficiary in an emergent care situation
- Nonbeneficiary in a nonemergent care situation
- FMCRA



PURPOSE OF CIRCULAR

Establishes specific reporting requirements and defines authorities for the recovery of funds in all third-party tortfeasor claims.

INDIAN HEALTH SERVICE (IHS) POLICY

IHS will comply with all regulations for reporting FMCRA claims so funds owed to IHS for the care and treatment can be recovered either directly or via contract health services. IHS will make sure all potential third-party claims are properly identified and reported to Office of General Counsel (OGC) (or designee).

BACKGROUND

- 1962: FMCRA statute was passed; however, collected funds went straight to U.S. Treasury.
- 1988: IHS was allowed to retain funds via an amendment to the Indian Health Care Amendments of 1987, Title II.

A FMCRA claim exists when:

IHS pays for or furnishes care to the injured person

 Patient's injuries are due to another person deemed to be at fault



	2.	Department	of Health	and Human	Services
--	----	------------	-----------	-----------	----------

For the Department of Health and Human Services, Indian Health Service, effective October 1, 2001 and thereafter:

Hospital Care Inpatient Day:

General Medical Care

Alaska

\$2,025

Rest of the United States

\$1,571

Outpatient Medical Treatment:

Outpatient Visit.

Alaska

\$ 363

Rest of the United States

\$ 196

Beginning October 1, 2001, the rates prescribed herein superceded those established by the Director of the Office of Management and Budget October 31, 2000 (FR Doc. 00-27726).

Director, Office of Management and Budget

CERTIFIED TO BE A TRUE COPY OF THE ORIGINAL DOCUMENT

CERTIFYING OFFICER

Who has the authority to make legal determination of liability?

OGC determines and asserts

This is why IHS shall report all potential third-party liability claims to the OGC or it's designee



FOUR ENTITIES INVOLVED

- Health Information Management
- Contract Health

Business Office

Facility FMCRA Coordinator



AREA FMCRA COORDINATOR

Area Office Process



Service Unit Clinical Provider

- Responsible for recording the diagnosis, type of injury, date, or place of occurrence on the Patient Care Component (PCC) and documenting all related clinical information at the time of service.
- Properly documenting all subsequent visits related to the injury, accident, poisoning, etc.



TYPES OF CLAIMS TO REPORT

- Motor vehicle accidents
- Falls
- Product liability
- Animal bites
- Electrical shocks
- Alleged medical malpractice in nonfederal facilities
- Food poisoning
- Railroad accidents
- Exposure to noxious fumes
- Faulty or defective equipment

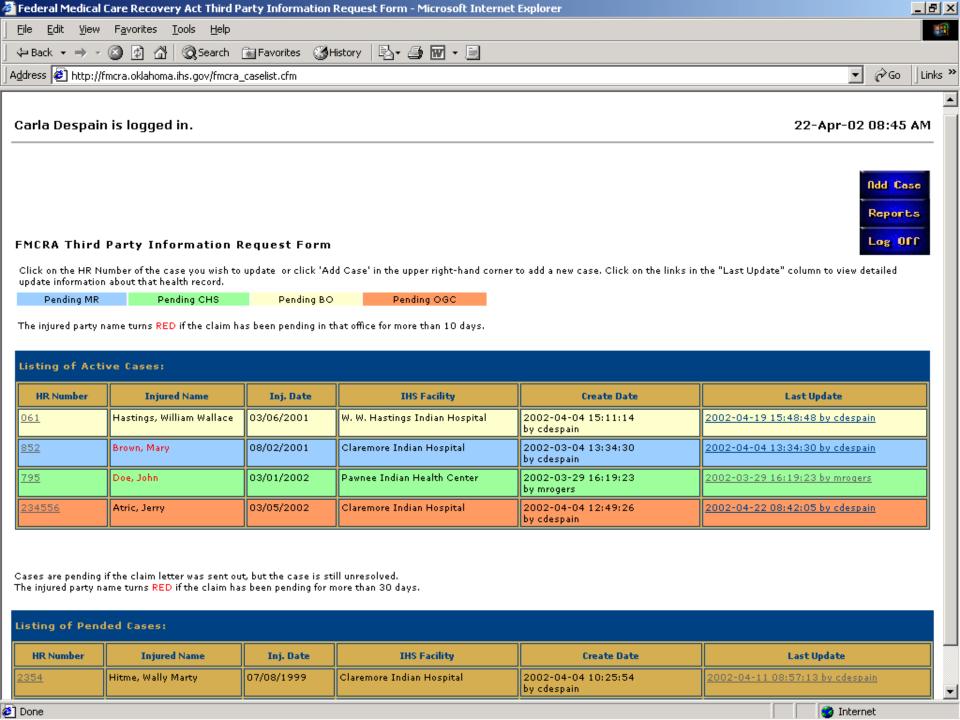


SCREENING AND REVIEWING PATIENT REGISTRATION

BUSINESS OFFICE MANAGER or designee

"THIRD-PARTY REPORT"





Notice of Payment from the OGC

Rollice, Sue (OKC)

From:

sue.bear@mail.ihs.gov

Sent:

Tuesday, November 15, 2005 1:40 PM

To:

Oldham, Debbie S (OKCLAW); Dunn, Teresa K. (OKCLAW)

Cc:

Rollice, Sue (OKC)

Subject:

FMCRA Case Settled

FMCRA Case 630 will be closed within 24 hours.

Injured name:

Injury date: 02/23/2005

Amount Recovered: \$0.00

FMCRA PAYMENTS FROM THIRD-PARTY PAYER

Service Units



QUESTIONS

Sue.rollice@hhs.gov

