

IHS cuts payments for contractors

by **Alexandra J. McClanahan**

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For the first time in recent history, the Indian Health Service is facing a shortage of funds so serious that contract health providers will be authorized to pay for only emergency and pre-natal medical services to Alaska Natives.

The shortfall immediately affects

patients in areas other than those served by Anchorage, the Tanana Chiefs Conference and the Southeast Alaska Regional Health Corp., according to IHS officials.

Dr. Richard Mandsager, director of the Alaska Native Medical Center, said there is not enough money available this year to cover all costs.

"From what I can tell, this is the

first time in this decade we've had to have a significant reduction," he said. "We've worried before, but we've always been able to get through the year."

Nationally, the shortfall is about \$20 million, with at least \$1 million in Alaska, according to Richard Zitzow, ANMC executive officer.

No decision has been made yet as

to whether any cuts will be made in services available to Alaska Natives at the ANMC, Mandsager said. He explained that IHS officials are currently assessing the situation and hope to have an answer within a week or so.

The director earlier this month sent a memo to contract health service providers, notifying them of the change.

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"A shortage of Indian Health Service contract health funds has made it necessary that as of June 22, 1989, the Alaska Native Medical Center will be able to provide payment for only emergency services to beneficiaries," the memo stated. "The definition of emergency is: medical services required when immediate medical attention is necessary to prevent death or serious impairment to life, limb, organ or function."

Mandsager said, however, that the memo has been expanded to include pre-natal care because of the IHS emphasis on paying for such care.

The IHS memo also states that all alternate payment resources must be

utilized and that the contract health service program will not make payment for any service when an alternate payment program is available or may be available on application.

"I strongly urge all beneficiaries to seek alternate medical programs which may be available to them before medical attention is required rather than wait until a medical need arises," Mandsager said in the memo.

The new fiscal year begins Oct. 1, and Mandsager said it is hoped that regular coverage can be resumed at that time.

Katherine Grosdidier, contract compliance officer at Southcentral Foundation in Anchorage, said her agency generally will not be directly affected because patients can be referred to the ANMC in Anchorage.

But she stressed that she is concerned about the shortfall and said she hopes the government will come up with supplemental funds.

Grosdidier said the only village served by Southcentral that will be directly affected by the cutback is Seldovia.

Mandsager said that in a community near Anchorage, a problem such as a minor laceration to a finger will be a judgement call. In such cases, it will be the patient's choice. If the patient cannot pay for the doctor any other way, he or she will be told to drive to Anchorage.

On the other hand, Mandsager said a person with such a problem in Unalaska would have the service paid for in the community.

Mandsager stressed that patients in

need of emergency care will have that care paid for.

"In the majority of cases, people that need care will get it," he said. "In other cases, it will be a financing question."

As another example, Mandsager said there is no question about caring for a person who suffers burns in a fire. The patient would be sent to Providence Hospital, the only facility able to provide care for serious burns, and the IHS would pay for it.

Chronic problems, however, such as a consultation with a surgeon about an arthritis problem may be delayed, he said.

"Ordinarily we would pay, but we can't this year," Mandsager said. "I've been praying we didn't ever have to come to this."