

Health Benefit Services

to American Indian & Alaska Native Peoples



- **Strengthening Sovereignty Through Self-Funding**
- **Medicare-like Rate Repricing**
- **340(B) Rx Drug Pricing**
- **CHEF Reimbursement**
- **Care Management & Data Analytics**
- **Fiscal Intermediary Services**



WebTPA has established a dedicated team focused on the health benefit needs of American Indian and Alaska Native populations to provide a customized “hand in glove” fit to each client’s cultural, health, and service expectations.

■ Maximize the Benefits of Sovereignty Through Self-Funding

Fully insured health programs negate American Indian and Alaska Native organizations’ **sovereignty**. WebTPA is expert in the establishment of self-funded health plans for Tribal entities, providing groups with the ability to customize plan designs, medical initiatives, health outreach, and communication materials. As a result of these efforts, we have seen improvements in **financial performance**, **member satisfaction** and **quality of health**.

There are three primary aspects of self-funding that can directly benefit sovereign nations:

- Medicare-like Rate (MLR) Repricing
- 340(B) Rx Drug Repricing
- Catastrophic Health Emergency Fund (CHEF) Reimbursement



■ Medicare-like Rate Repricing

WebTPA keeps costs for claims incurred at hospitals and critical access facilities at or below Medicare rates. Our dynamic infrastructure enables us to provide Medicare-like Rate (MLR) repricing to American Indian and Alaska Native plan members. This saves sovereign entities **millions of dollars**. WebTPA’s flexible, proprietary claims system efficiently processes claims for MLR pricing at the time of initial payment to maximize cash flow and reduce duplication of administration and recovery fees.

■ 340(B) Rx Drug Pricing

WebTPA helps ensure that Tribal clients benefit from valuable programs such as 340(B) Rx drug pricing. We integrate these beneficial prescription drug programs that charge all employees and their family members what the lowest cost drug manufacturers charge the federal government. Implementing this valuable program helps control one of the fastest growing healthcare cost drivers facing plans today.

Catastrophic Health Emergency Fund (CHEF) Reimbursement

WebTPA accesses the Indian Health Services (IHS) fund intended to minimize the burden of high dollar catastrophic events exceeding \$25,000. Such reimbursements are never guaranteed, as the fund is comprised of limited monetary allocations each year, so you need an advocate on your side. We work closely in collaboration with each client's Contract Health Services (CHS) Program to strengthen its CHEF claims submission process.



Care Management & Data Analytics

WebTPA strives to have a full and immediate understanding of the most common and significant health issues confronted by your population. WebTPA's industry-leading population health management tool enables us to provide frequent updates to clients illustrating health trends, predictive costs, high risk utilizers, and compliance with chronic conditions and early cancer detection. These data serve our medical and analytic experts as a foundation to all of our medical management program offerings, resulting in positive financial trending, improved quality of life, and an enhanced ability to provide specific and meaningful solutions. **It's not simply about data - it's doing something about it thoughtfully and rapidly.**

Fiscal Intermediary Services

WebTPA serves as a full-service fiscal intermediary partner to administratively strengthen our American Indian and Alaska Native clients. Our system has been designed to allow us the flexibility to handle the administrative component of your CHS healthcare reimbursements. Using an independent third party such as WebTPA for these functions allows for **secure, reliable and efficient processing.**

Why WebTPA?

- Expertise and Proven Results
- Care and Compassion
- Effective Use of Technology
- Maxmizing Health Care Dollars
- Improvement in Member Health



Experienced. Flexible. Innovative.

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