

Indian Health Service Reimbursement Rates for 20201

April 21, 2020

This brief provides information to Tribes on Indian Health Service (IHS) reimbursement rates—also known as "OMB rates" or "encounter rates"—for calendar year (CY) 2020.

On April 20, 2020, a notice appeared in the Federal Register² announcing that the IHS Acting Director, under the authority of sections 321(a) and 322(b) of the Public Health Service Act, Public Law 83-568, and the Indian Health Care Improvement Act, has approved the following rates for inpatient and outpatient medical care provided by IHS facilities for CY 2020 for Medicare and Medicaid beneficiaries, beneficiaries of other federal programs, and for recoveries under the federal Medical Care Recovery Act. This notice does not include Medicare Part A inpatient rates, as they are paid based on the prospective payment system. Since the inpatient per diem rates set forth in this notice do not include all physician services and practitioner services, additional payment shall be available to the extent that those services are provided. The IHS reimbursement rates for CY 2020 appear below.

IHS Reimbursement Rates for CY 2020

Inpatient Hospital Per Diem Rate (Excludes Physician/Practitioner Services)

Lower 48 States \$ 3,675 Alaska \$ 3,529

Outpatient Per Visit Rate (Excluding Medicare)

Lower 48 States \$ 479 Alaska \$ 710

Outpatient Per Visit Rate (Medicare)

Lower 48 States \$ 427 Alaska \$ 683

Medicare Part B Inpatient Ancillary Per Diem Rate

Lower 48 States \$ 838 Alaska \$ 1,186

¹ This brief is for informational purposes only and is not intended as legal advice. For questions on this brief, please contact Doneg McDonough, TSGAC Technical Advisor, at DonegMcD@Outlook.com.

² IHS, "Reimbursement Rates for Calendar Year 2020"; see 85 FR 21864 at https://www.govinfo.gov/content/pkg/FR-2020-04-20/pdf/2020-08247.pdf.

Outpatient Surgery Rate (Medicare): Established Medicare rates for freestanding Ambulatory Surgery Centers.

Effective Date for CY 2020 Rates: Consistent with previous annual rate revisions, the CY 2020 rates will take effect for services provided on/or after January 1, 2020, to the extent consistent with payment authorities including the applicable Medicaid State Plan.

Table 1 below provides a comparison of IHS reimbursement rates for CY 2020 and CY 2019.

Table 1: Comparison of IHS Reimbursement Rates, CY 2020 and CY 2019

| Service | | CY 2020 Rate | CY 2019 Rate | \$ Change | % Change |
|--|-------------------------------|--|--|-----------|----------|
| Inpatient Hospital Per Diem Rate (Excludes Physician/ Practitioner Services) | Lower 48 States | \$3,675 | \$3,442 | +\$233 | +6.8% |
| | Alaska | \$3,529 | \$3,434 | +\$95 | +2.8% |
| Outpatient Per Visit Rate (Excluding Medicare) | Lower 48 States | \$479 | \$455 | +\$24 | +5.3% |
| | Alaska | \$710 | \$682 | +\$28 | +4.1% |
| Outpatient Per Visit Rate (Medicare) | Lower 48 States | \$427 | \$405 | +\$22 | +5.4% |
| | Alaska | \$683 | \$646 | +\$37 | +5.7% |
| Medicare Part B Inpatient Ancillary Per Diem Rate | Lower 48 States | \$838 | \$789 | +\$49 | +6.2% |
| | Alaska | \$1,186 | \$1,144 | +\$42 | +3.7% |
| Outpatient Surgery Rate (Medicare) | Lower 48 States and Alaska | Established Medicare rates for freestanding ambulatory surgery centers | Established Medicare rates for freestanding ambulatory surgery centers | N/A | N/A |

Sources: IHS, 84 FR 2241 and 85 FR 21864

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