POLICY: Identified procedures must be followed in authorizing IHS beneficiary patient travel between Dillingham, Anchorage and/or BBAHC villages. There are specific categories of patients who are eligible for BBAHC travel funding.

PURPOSE:
1. To define procedures for authorizing Indian Health Services (IHS) beneficiary patient travel funds between Dillingham, Anchorage and/or Bristol Bay Area Health Corporation (BBAHC) villages.
2. To define those categories of patients eligible for BBAHC travel funding.

PROCEDURE:
A. Alternative Travel Funds:
   It is understood that alternative funds available for travel will be pursued whenever possible prior to requesting authorization of BBAHC travel funds.

B. Authorization:
   1. Authorization for patient travel must be obtained prior to travel or it will not be paid. BBAHC employed Physicians may authorize payment for the following types of travel:
      a) Life/Limb threatening emergencies (round-trip).
      b) Urgent conditions where a time delay could potentially contribute to the worsening of a situation (round-trip).
      c) Inpatient or emergency transfers to ANMC (one-way).
      d) Escort for Endoscopy/Colorectal procedures performed at Kanakanak Hospital.
      e) Essential patient escorts (determined by authorizing medevac practitioner):
         i. Will have travel paid back to point of origin or equivalent cost duty station. If escort is not returning to point of origin or approved duty station, no further disbursements are authorized.
         ii. Will be expected to return to point of origin if back haul or charter flight occurs. No reimbursements will be made for later time/date seat fare if return charter flight is available unless pre-authorized by authorizing medevac practitioner for valid reasons.

2. Patient Travel as stated in “Special Categories of Patient Travel” in this policy:
a) Village Community Health Aides and Community Health Practitioners shall record the authorizing practitioner’s name and travel authorization numbers on the patient encounter form. Failure to do so may result in travel not being paid.

b) Patients coming to Kanakanak Hospital for scheduled appointments, as walk-ins, for specialty clinic appointments, for Dental or Optometry appointments, or for other routine non-emergency reasons shall not have travel paid by BBAHC. Those patients included under “Special Categories of Patient Travel” in this policy shall have all or part of their travel paid.

c) Patients travelling to Anchorage or elsewhere for elective diagnostic studies, procedures, or second opinions shall not be funded.

d) The following people are unable to authorize travel:
   i. Nurses except in the setting of Case Management Population Health Nurse who is authorized to sign travel authorization exclusively for patients when travel is specifically for Colorectal Cancer / Mammogram screening to include an approved escort travel authorization for colonoscopy.
   ii. Secretaries/Clerks
   iii. Medical Students
   iv. ANMC Medical Staff shall not obligate BBAHC travel funds.
   v. Non-BBAHC employed Physicians.

C. Special Categories of Patient Travel:

1. Cancer Patients: Round-trip travel by diagnosed/suspected cancer patients for diagnostic evaluations, specialized treatment, specialty reassessment, or other reasons directly related to their illness shall be authorized.

2. Colorectal Cancer / Mammogram Screening according to Standardized & Accepted Guidelines: roundtrip travel and quarters for patients are approved.
   a) Travel authorization in this setting will be signed by the Case Management Population Health Nurse following a review to confirm that all recommended preventative services have been scheduled to be included in the planned trip. Nurse shall consult with patient’s Primary Care Provider or on-call provider if any clinical questions are raised.
   b) Travel will be arranged for patient and approved escort when visit includes colonoscopy for colorectal cancer screening.

3. Escorts are not covered for Mammogram Screening.

4. Patients with Specific Medical Requirements: Patients requiring recurring specialized treatments, or procedures, or mandatory reassessments by specialists in Dillingham or Anchorage shall have round-trip travel authorized if no other sources of travel funding is available. Examples of cases in this category include:
   a) HIV/AIDS
   b) Postoperative device removal or adjustments.
   c) Organ transplant
5. Obstetrical Travel that will be funded: for those who do not have an alternate funding source:
   a) First Prenatal Visit: Roundtrip transportation for the initial prenatal visit, which may be combined with the screening ultrasound.
   b) Teen Pregnancy: (less than 18 years of age) shall have round-trip transportation paid for their first prenatal visit regardless of trimester of pregnancy. An additional fare will be provided for patent/legal guardian to accompany the teen to this appointment, if determined appropriate by a BBAHC physician.
   c) Screening Ultrasound: Round-trip transportation for screening ultrasound, typically at 18 – 20 weeks – 35 week risk stratification appointment to include physician prenatal appointment, labs and ultrasound.
   d) High Risk Pregnancy: Whenever in the course of a pregnancy a patient requires advanced medical care, BBAHC will fund round-trip airfare to Dillingham or Anchorage for necessary diagnostic testing, or specialty evaluation, as determined by a physician. Additionally, high risk obstetrical patients determined inappropriate to deliver in Dillingham shall have round-trip transportation funded for boarding in Anchorage, at a date commensurate with their risk status. Maternal Child Health (MCH) Program Manager may authorize round-trip travel funds for high risk patients to board in Anchorage.
   e) Obstetrical Boarding: Three (3) weeks prior to expected delivery date obstetrical patients will either stay with relatives/friends in Dillingham or at the hospital boarding facilities. A round-trip airfare will be authorized.
   f) Obstetrical Medical Evacuations: Emergency transports from a village for patients in active labor will be funded only if labor occurs prior to their anticipated boarding date (37 weeks gestation). Patients in active labor requiring medical evacuation who are less than three (3) weeks away from their expected delivery date will not have medical evacuation expenses paid by the hospital. Patients will be billed for medevac costs. No patients shall be denied medical evacuation should it become medically indicated and able to be provided under safe conditions.

6. Substance Abuse Treatment: Travel for patients participating in long term inpatient care in approved treatment programs shall have their one-way airfare funded. Upon completion of an approved treatment program, patients shall have airfare paid back to point of origin.

7. Diabetes Program: Travel for patients diagnosed with Diabetes and having a Diabetes-related illness or injury which is life, limb or vision threatening would have their travel to Dillingham or Anchorage paid. Travel to Diabetes self-
management classes and annual diabetic clinic in Dillingham only will also be paid for, providing funds are available in the Diabetes Program budget. In order to have the Diabetes Program provide travel for the above reasons, it will be as payer of next to last resort provided the client is not Medicaid eligible and has no other insurance that covers travel. The Diabetes Coordinator will make the travel arrangements; emergent travel may be arranged by the inpatient unit clerk after authorization by the physician.

D. Waivers to this Policy: A waiver to any portion of this policy will only be possible with CEO or designee approval and, if necessary, Social Services screening and recommendation.

Approvals:  
Clinical Director  
President/Chief Executive Officer (or designee)  
Chair of the Board of Directors (or designee)

Reference/Standard: N/A