Community Health Program Benefits

To allow the tribe to account for and process payment for medical and dental services, the following procedures are required:

- The enrolled Nooksack Tribal member shall notify the Nooksack Tribe’s Health Department Contract Health Service Program and obtain prior authorization of services prior to their Medical and Dental Service appointment.
- The enrolled Nooksack Tribal member shall provide the name of their health care provider along with phone number, address, type of medical/dental services requested and the date the appointment is scheduled. Treatment plans must be approved prior to scheduled appointments.
- The Contract Health services staff shall coordinate with the NIT Tribal member and the medical and/or dental service vendor to obtain costs.
- Contract Health staff shall utilize any patient health care coverage such as; Health Insurance, State or Federal Agency programs which allow more NIT Tribal members to be served.
- The patient’s health care provider shall submit an invoice to the Nooksack Indian Tribe Contract Health Services Programs for the processing of payment by the NIT Accounting Office.
- The Contract Health program staff will notify the enrolled NIT Tribal Member of the payment of the medical and/or dental invoices.

All enrolled Nooksack Tribal Members shall complete the following documents prior to receipt of CHP services: Patient Registration form, Notice of Privacy Practice form and Assignment of Benefits form and Application form.

Service Delivery Plan

The Tribal Council allocated a total of $500,000 which is distributed in the following categories and amounts:

- Vision Care
  - Standard Eye Exam $150.00
  - Frames: $300.00
  - Total Package $450.00

- Hearing Aids total package: $2,000.00
  - Hearing Aids per unit $500
  - Repairs: $300.00 max

- Durable Medical Equipment
  - Wheelchairs: $5,000.00 max
  - Max co-pay per person: $1,000.00 max

- Durable Medical Supplies
  - $500.00 per person/per year max

- Podiatry Foot Care
  - Podiatry Foot Care/ Diabetic $190
  - Total Package: $190

- Dental Dentures (one time only due to limited funds)
  - Complete Upper/Lower Dentures: $5,000
  - Partial Denture: $1,400-$1,600
  - Denture Flipper: $350-$600
  - 3 unit Anterior Bridge $3,000-$3,500
  - Implants: $3,500.00 max
  - Crowns : $1000.00 max
  - On a Case by Case basis

Orthotic & Diabetic Shoes
- Orthotic & Diabetic Shoes: $300
- Total Package $400

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