



Cherokee Nation Tribal Council Health Committee Report

Claremore Indian Hospital

Month/Year of the report: September 2012

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Accomplishments:

- **Staffing:** Hired one ER physician but still recruiting for ER, one OB/GYN and one Internist.
- **Visits:** Outpatient visits for September down 2.6% over the same period the previous year.
- **Revenues:** Revenues for FY2012 increased 17.97% over the same period the previous year.

Future Plans / New Initiatives:

- **New Services:**
 - Orthopedic surgeon has started seeing patients and doing limited surgeries.

Workload:

Actual numbers/month

Outpatient visits down	2.6%	21,363
Admissions down	31.4%	59
Newborns down	25.0%	18
New charts down	12.8%	349
Reactivated Charts up	14.1%	267

These statistics are compared to FY2011 statistics for the same time period. (September)
Occupancy rate for September 2012: 20.0%

Third Party Collections:

September collections

Medicare:	\$ 71,656.98
Medicaid:	118,744.44
Private Insurance:	<u>175,259.72</u>
	\$ 365,661.14

Year-to-date collections for FY 2012: \$ 15,173,260.87

Amount billed for September 2012: \$ 1.98 million

Collections are up compared to FY2011 collections for same time period. \$ 2,312,322.47

Percentage of account receivables pending for claims > 120+ days: 5%

CHS Activities:

September cases

Funded:	348 cases:	\$ 772,020.00
Denials:	148 cases:	\$ 361,645.00
Deferred:	344 cases:	\$ 213,070.00

Files to Committee 1224

**RECEIPT OF REFERRAL FROM
OUTLYING CLINICS ON PATIENT
WITH NO CHART AT
CLAREMORE SERVICE UNIT**

**IF REFERRAL DOESN'T HAVE PATIENT CONTACT
INFORMATION THEN NOTIFY THE OUTLYING CLINIC THE
REFERRAL ORIGINATED TO GET PATIENT'S CONTACT
INFORMATION**

**NOTIFY PATIENT BY TELEPHONE THAT HE/SHE LIVES IN THE
CLAREMORE CONTRACT HEALTH SERVICE AREA AND A
CHART NEEDS TO BE MADE AT CLAREMORE'S
REGISTRATION TO ESTABLISH ELIGIBILITY THEN FOLLOW-
UP WITH A LETTER AND CONTRACT HEALTH SERVICE
BROCHURE.**

**IN THE MEANTIME, PREPARE REFERRAL FOR NEXT COMMITTEE
MEETING. REFERRAL CANNOT BE ENTERED IN REFERRED CARE
INFORMATION SYSTEM UNTIL CHART IS MADE BUT IT CAN BE
SUBMITTED TO COMMITTEE FOR REVIEW.**

**IF REFERRAL IS APPROVED
BY COMMITTEE THEN WE
HAVE TO WAIT FOR THE
PATIENT TO MAKE A CHART
AND ESTABLISH
ELIGIBILITY BEFORE WE
CAN SCHEDULE AND WE
CANNOT ISSUE A PURCHASE
ORDER FOR PAYMENT**

**IF THE REFERRAL IS DENIED OR
DEFERRED BY THE COMMITTEE, A
LETTER WILL BE SENT OUT TO
THE PATIENT TO INFORM THEM
OF THE COMMITTEE'S DECISION.**

**IF PATIENT DOES NOT
ESTABLISH A CHART WITHIN
THIRTY DAYS WE WILL SEND
A DENIAL LETTER.**