

# **SILETZ COMMUNITY HEALTH CLINIC POLICY**



## **ADMINISTRATION**

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**PART 1  
Administration Department**

**I. WELCOME**

**A. Purpose**

The purpose of this policy is to ensure patients are aware of service types and eligibility guidelines.

**B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to: welcome each patient; enumerate services provided to include medical, laboratory, radiology, pharmacy, dental, diabetes self-management, optometry, mental health and behavioral health; provide notice to patients about eligibility requirements; and ensure the patient’s visit is pleasant and productive.

**C. Check-In Guidelines**

1. Check-in guidelines for each visit are as follows:

a. First Time Patients

- i. First time patients shall report 30 minutes before the first appointment for registration purposes. Registration does not occur between 11:00 AM and 1:00 PM.
- ii. During check-in, the first time patient must inform the Patient Care Coordinator that this is a first visit.

b. Recurring Patients

Recurring patients must arrive 15 minutes before the appointment time.

c. Cancellation

SCHC reserves the right to cancel an appointment if the patient arrives after the scheduled time.

d. Urgent Care

Provisions are made to evaluate patients seeking urgent care services with minimal disruption to scheduled patients. The patient must contact the Patient Care Coordinator for assistance.

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## 2. Patient Inquiries

Patients may contact SCHC at 541-444-1030 or 1-800-648-0449 for questions regarding clinic policy and procedure.

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## **II. HOURS OF OPERATION**

### **A. Purpose**

The purpose of this policy is to ensure patients are aware of hours and days of opening.

### **B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to open its doors to patients in a consistent manner and during days and hours that are conducive to heightened patient visits.

### **C. Hours of Operation (General, Medical, Dental, Optometry, Pharmacy)**

1. The SCHC is open for business as follows:
  - a. Siletz Community Health Clinic
    - i. Monday through Thursday from 8:00 AM to 5:00 PM
    - ii. Friday from 10:00 AM to 5:00 PM
  - b. Medical Clinic
    - i. Hours
      - A) Monday through Thursday
        - 1) 8:00 AM to 12:00 PM
        - 2) 1:00 PM to 5:00 PM
      - B) Friday
        - 1) 10:00 AM to 12:00 PM
        - 2) 1:00 PM to 5:00 PM
    - ii. Patient Appointments (Non-Emergency)
      - A) Monday through Thursday
        - 1) 8:00 AM to 12:00 PM
        - 2) 1:00 PM to 4:30 PM

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B) Friday

1) 10:00 AM to 12:00 PM

2) 1:00 PM to 4:30 PM

iii. Emergencies

See Part 6B Medical Staff Policy, Section VI.

c. Dental Clinic

i. Hours

A) Monday through Thursday

1) 8:00 AM to 12:30 PM

2) 1:30 PM to 5:00 PM

B) Friday

1) 10:00 AM to 12:30 PM

2) 1:30 PM to 5:00 PM

ii. Patient Appointments (Non-Emergency)

A) Monday through Thursday

1) 8:30 AM to 12:30 PM

2) 1:30 PM to 4:30 PM

B) Friday

1) 10:00 AM to 12:30 PM

2) 1:30 PM to 4:30 PM

iii. Emergencies

A) Monday through Thursday

1) 8:15 AM to 8:45 AM

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- 2) 1:30 PM to 2:00 PM
- B) Friday
  - 1) 10:00 AM to 10:30 AM
  - 2) 1:30 PM to 2:00 PM
- iv. Walk-In
  - A) Every Other Tuesday
    - 1) 8:30 AM to 12:30 PM
    - 2) 1:30 PM to 4:30 PM (last patient is checked in at 3:30 PM)
- d. Optometry Clinic
  - i. Hours
    - A) Monday through Thursday
      - 1) 8:00 AM to 12:30 PM
      - 2) 1:30 PM to 5:00 PM
    - B) Friday
      - 1) 10:00 AM to 12:30 PM
      - 2) 1:30 PM to 5:00 PM
  - ii. Patient Appointments (Non-Emergency)
    - A) Monday through Thursday
      - 1) 8:15 AM to 12:30 PM
      - 2) 1:30 PM to 4:30 PM
    - B) Friday
      - 1) 10:00 AM to 12:30 PM

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2) 1:30 PM to 4:30 PM

iii. Emergencies

The Optometrist addresses emergencies on a case-by-case basis during appointment hours.

iv. Walk-In

Last Thursday of Month

8:15 AM to 11:15 AM

e. Pharmacy

i. Monday through Thursday

8:00 AM to 5:00 PM

ii. Friday

10:00 AM to 5:00 PM

f. Behavioral Health

8:00 AM to 12:00 PM

1:00 PM to 4:30 PM



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### **III. SERVICE ELIGIBILITY**

#### **A. Purpose**

The purpose of this policy is to ensure patients are aware of priorities when offering services.

#### **B. Mission Statement**

The mission statement is as follows: "Dedicated to the Health and Well-being of the Members of the Confederated Tribe of the Siletz Indians and the local community."

#### **C. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to uphold the mission statement by prioritizing and/or limiting services based upon eligibility status.

#### **D. Eligibility and Priority**

1. The following individuals are eligible for services:
  - a. Enrolled members of the Confederated Tribes of Siletz Indians.
  - b. Verifiable enrolled Native American from any Tribe.
  - c. Verifiable adopted, foster or stepchild (Native or Non-Native), as long as the child remains a dependent of an eligible Siletz Tribal member thru age 18.
  - d. Non-native patient accepting the SCHC payment policy.
2. Priorities are established by availability of services and are subject to change.
3. Other programs may be open to any member of the Siletz community.

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#### **IV. PATIENT CARE AREA ACCESS**

##### **A. Purpose**

The purpose of this policy is to ensure patients are accorded the utmost confidentiality when receiving services.

##### **B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to allow non-authorized staff in patient care areas only if their presence will not interfere with the Clinic's primary mission of providing care to patients.

##### **C. Patient Permission Required; SCHC Withdrawal of Non-Staff**

1. Staff obtains verbal permission from the patient before non-authorized staff are permitted in patient areas. The patient maintains his or her right to refuse non-staff interaction.
2. SCHC reserves the right to withdraw any non-staff from the clinical setting when the non-staff is unacceptable for reasons of health, performance, or other reasonable causes in order to maintain acceptable standards of care.

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## **V. RIGHTS AND RESPONSIBILITIES**

### **A. Notice, Patient Rights and Patient Responsibilities**

1. The rights and responsibilities of patients are distributed to new patients at registration, posted in the waiting area, distributed to new employees at the time of orientation and posted on the CTSI website.
2. Patient rights are as follows:
  - a. You have the right to considerate, respectful and culturally sensitive care.
  - b. You have the right to be given complete information, to the degree known, from your health care provider concerning your health care and recommended treatments.
  - c. You have the right to know which health care provider is responsible for your care and to choose or change providers if such are available.
  - d. You have the right to know your health care provider's credentials and privileges and when he or she was granted Medical Staff privileges.
  - e. You have the right to participate in decisions about your treatment and to develop a mutually acceptable treatment plan in conjunction with your health care provider. You will be informed if your treatment is new, experimental, or unproven.
  - f. You have the right to give, withhold or withdraw your consent to have special procedures or treatments done to the extent permitted by law. You must be informed of the risks you are taking (although in emergency situations the health care provider may not be able to provide extensive information because of the loss of time, which could be dangerous for you).
  - g. You have the right to participate in decisions regarding the intensity and scope of care. Assistance to help you obtain a Living Will or Durable Power of Attorney will be made available at your request.
  - h. You have the right to privacy and dignity concerning your health care issues. Case discussion, examination and treatment shall be conducted in confidence. Medical and other health professional students will always be introduced to you as such. You have the right to refuse permission for their presence if so desired.

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- i. You have the right to know the Siletz Community Health Clinic’s privacy practices including how all the records and other information about your care will be used and disclosed, and how you can access this information.
  - j. You have the right to know how the Siletz Community Health Clinic is related to other health facilities (private, county, tribal, state or federal facilities).
  - k. You have the right to be informed of service limitations or payment policies concerning services prior to treatment.
  - l. You have the right to expect reasonable continuity of care such as to know: what appointment times are available to you; what services are available to you; where the services can be obtained.
  - m. You have the right to know what SCHC rules and regulations apply to your conduct.
  - n. You, or a person of your choice, have the right to present a grievance, complaint, and suggestion regarding health services to SCHC Administration, who will follow-up and respond in writing within ten (10) working days.
  - o. You have the right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
  - p. You have the right to use a pharmacy that is not owned or operated by SCHC.
3. Patient responsibilities are as follows:
- a. You are responsible for your own behavior and are expected to treat the staff, other patients, clients, visitors and community members with respect and courtesy. Parents or guardians are responsible for their children.
    - i. Persons under the influence of drugs or alcohol may be excluded from CTSI property or tribal program activities.
    - ii. Physical or verbal abuse, harassment, or the use of foul language or intimidation will not be tolerated in any form (in person, telephonic, writings). Bullying, harassment, and/or sexual harassment of staff, other patients, clients, visitors, or community members is prohibited.

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- b. Any person engaging in any of the above behaviors may be refused services and, when warranted, will be asked to leave the premises.
- c. You are responsible for making and keeping appointments. If not able to keep an appointment, you must call SCHC to cancel or reschedule the appointment at least 24 hours prior to your scheduled appointment so that someone else can be given the opportunity to be seen.
- d. Routine prescription refills should be requested two working days prior to time of pickup to allow the pharmacy time to contact your health care provider.
- e. You are responsible for informing SCHC of insurance providers and any changes in your personal status, including changes in your address or phone number, legal name changes and changes in eligibility or health insurance coverage.
- f. You are responsible for informing SCHC about any living will, medical power of attorney or other directive that could affect your care.
- g. You are responsible for releasing all information related to past illnesses, treatment and medications (prescriptions, OTC and herbal supplements) to assist the staff in the provision of optimal health care.
- h. The success of your care is related to your cooperation in following directions, treatment plans and other recommendations given you by the health care providers. If you desire to alter the course of recommended treatment (such as stopping a medication), please consult your provider first.
- i. Parents/legal guardians or designated guardians are responsible for accompanying children to SCHC for appointments for routine healthcare and dental care if the child is under age 15. Parents/legal guardians or designated guardians are responsible for accompanying children to SCHC for sports physical or well child exam appointments until the child reaches the age 18. SCHC will not require parental permission or attendance for appointments for adolescents, age 12 and over, seeking diagnosis or treatment related to sexually transmitted disease, pregnancy, or contraception. Such care will be considered confidential, including from the adolescent's parent(s), although evidence of child abuse will be reported as mandated.
- j. Depending on eligibility at the time of service, you may be responsible for costs for services rendered.

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- k. You are responsible for adherence to COVID related policies and procedures.

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## **VI. NO-SHOW POLICY**

- A. No-show appointments have a significant negative impact at the Siletz Community Health Clinic (SCHC) and with healthcare that is provided to the patients. When a patient no-shows a scheduled appointment it can:
1. Impact the health and all treatment for the no-show patient.
  2. Impact the health and all treatment of another patient whom could have been seen in the appointment slot.
  3. Waste limited time and resources of the providers, staff, and tribal funding preparing for that appointment.
  4. Impact waiting times and subsequent treatment for the rest of the patients on the schedule for the day.
- B. The clinic shall monitor and manage appointment no-shows and late cancellations. The goal is to provide excellent care to each patient in a timely manner. If it is necessary to cancel an appointment, patients are required to call or leave a message at least 24 hours before their appointment time. Notification allows the clinic to better utilize appointments for other patients in need of prompt care.
- C. Each clinic and program shall establish a no show procedure that meets the unique needs of its patients.
- D. Appeal
1. A patient may appeal a decision regarding the no-show appointments, in accordance with the Tribal Administrative Procedures Ordinance.
  2. SCHC will include the appeal process in the letter regarding the no-show appointments.

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## **VII. TOBACCO USE**

### **A. Policy**

It is the policy of the Siletz Community Health Clinic to ensure a drug free clinic; this includes the use of tobacco in the form of cigarettes, cigars, chewing tobacco and e-cigarettes.

### **B. Ceremonial Use**

Ceremonial use of tobacco may be utilized as part of a cultural treatment activity with the Behavioral Health Program or cultural activity with the Prevention Program.

### **C. Smoking Cessation Program**

Patients or clients who want to stop smoking may participate in a smoking cessation program, including referrals to a primary care physician.



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## **VIII. RANDOM DRUG TESTING**

### **A. Policy**

It is the policy of the Siletz Community Health Clinic to ensure random drug testing is conducted for employees working in the following positions or capacities: peer recovery mentors for the behavioral health, community health, and Medication Assisted Therapy (MAT) programs; employees assuming a peer support relationship with clients and patients; and employees working in the Behavioral Health Program. The drug testing will be conducted with instant urine analysis test administered through the Human Resource department.

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## **IX. GENERAL CLINIC ORIENTATION**

### **A. General Topics**

Individual who are working at the clinic, in any capacity, are orientated regarding the following:

1. Crisis Response
2. Cultural Competency
3. Fraud, Waste, and Abuse
4. HIPAA
5. Infection Control
6. Patient Rights and Responsibilities
7. Policies and Procedures
8. Risk Management
  - a. Safety Plan
  - b. Incident, Accident, Variance Reports
  - c. Fire Safety
  - d. Fire Extinguishers
  - e. Evacuation and Safe Zones
  - f. Loss of Utilities, Power, Water, Heating, and Cooling
  - g. Supplies and Housekeeping
  - h. Hazard Surveillance Inspections
  - i. Equipment Safety
  - j. Equipment Malfunctions
  - k. Extension Cords

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- l. Personally Owned Electrically Operated Equipment
- m. CTSI Maintenance Work Order Request
- n. Information Systems for Health Department

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## **X. ORIENTATION (MEDICAL INTERNS, DENTAL INTERNS AND RESIDENTS)**

### **A. Purpose**

The purpose of this policy is to advance the knowledge and clinical skills related to the practice of clinical medicine by assisting with opportunities for medical, dental and nursing students.

### **B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to provide students with a variety of learning experiences including participation in structured learning experiences outside their learning institution under direct supervision from a clinic employee.

### **C. Student and SCHC Responsibilities**

1. Student status and responsibilities are as follows:
  - a. Student is assigned to a clinic employee as preceptor in their medical or dental specialty.
  - b. Student is subject to the supervision, direction and control of the medical or dental staff.
  - c. Student is subject to the policies and practices of the clinic.
  - d. Student earns no fee, stipend or remuneration other than the mutual benefits derived from the teaching program and experience. However, other organizations or programs within CTSI may compensate the student.
  - e. Student submits a letter, from the college or university, showing that student obtained the following if required by the contract or agreement:
    - i. Up-to-date immunizations of Diphtheria, Tetanus, Rubella, Hepatitis B or proof of prior disease, and yearly proof of tuberculin skin tests and/or chest x-rays.
    - ii. CPR certification.
    - iii. Blood borne pathogen training.
  - f. Student submits a letter, from the college or university, showing that student obtain the COVID vaccine.
  - g. Student receives a name badge identifying them as a student.

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- h. Student provides proof of HIPAA training.
  - i. Student maintains confidentiality regarding all privileged information concerning patient care.
  - j. Workers' compensation and malpractice insurance are covered by the student's educational facility.
2. SCHC responsibilities are as follows:
- a. SCHC does not discriminate against any employee, student, staff physician or dentist, medical provider, patient or potential patient on the basis of race, age, color, religion, national origin, sex, sexual orientation, marital status, handicap or gender. SCHC complies with tribal and federal laws prohibiting discrimination.
  - b. The employee acting as preceptor provides patient care under the Medical Bylaws.
  - c. The teaching program (preceptor/student relationship) will not interfere with the primary mission of providing care to patients.
  - d. The preceptor's medical or dental assistant shall obtain verbal permission from the patient before any student/patient interaction. The patient maintains his or her right to refuse student interaction.
  - e. SCHC reserves the right to withdraw any student from the clinical setting when the student is unacceptable for reasons of health, performance or other reasonable causes in order to maintain standards of care.
  - f. In the event of any accidental exposures (i.e. needle sticks), the student contacts the preceptor who will immediately contact the health practitioner. SCHC assumes responsibility for obtaining testing consent from the source patient and testing the source patient for HIV/HBV infections. This is done in compliance with the OSHA blood borne pathogen standard. The source patient is asked to sign a consent to release the results to the exposed worker or representative of the referring learning institution.
3. Documentation requirements of preceptor and student:

According to the Health Care Financing Administration (HCFA) guidelines, the student sees the patient, discusses the patient with the preceptor and documents the visit on the chart. Then, the preceptor sees the patient, repeats and re-documents the relevant elements of the history and portions of the exam that

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substantiate the diagnosis, assessment and plan of care. The student and the precepting provider sign all documentation.

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## **XI. MANDATORY REPORTING**

- A. All Tribal Employees who have a reasonable cause to suspect that a minor has been abused or neglected shall report the suspected abuse or neglect to the Tribal Indian Child Welfare (ICW) Department. Any employee who files a report of suspected abuse or neglect may, upon request and approval of the Tribal Court, remain anonymous, except those individuals who are required to report abuse according to their licensed professional standards.
- B. This policy does not supplant other professional mandates, or reporting requirements for child abuse reporting by licensed professional employees. Licensed professional employees must report suspected child abuse or neglect to the ICW Department and as required by their licensing agency (usually to the State Child Abuse Hotline).
- C. Licensed professional employees must report suspected Elder abuse or neglect as required by their licensing agency (usually to the State Elder Abuse Hotline).

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## **XII. MEETINGS AND ALL STAFF TRAININGS**

### **A. Purpose**

The purpose of this policy is to conduct staff meetings, on a consistent basis, to allow for the exchange of ideas, monitoring of quality care, resolution of problems, increasing effectiveness of clinic operations, increasing effectiveness of interdisciplinary care and continuing education.

### **B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to provide an open and continuous flow of information between management and staff through the regularly scheduled meetings to ensure employees are informed of current events.

### **C. Meetings**

#### **1. Meetings**

- a. All Staff Meetings. These meetings are conducted quarterly and in conjunction with all staff trainings. The meetings are mandatory for SCHC staff.
- b. Planning/QI Committee. These meetings are conducted monthly.
  - i. Committee membership consists of the following: Health Director as Chairperson, Medical Director, Administrative/QI Coordinator, Dental Director, Staff Physician, Optometrist, Pharmacist-In-Charge, Community Health Director, Diabetes Program Director, Nursing Supervisor, Health Information Lead Medical Support, Business Office Manager, IS Representative, Behavioral Health Program Administrator and others as appointed by the Health Director.
  - ii. The committee duties include:
    - A) review clinic policies and procedures before sending to the Health Committee for approval;
    - B) review and approve forms;
    - C) review quality improvement reports and issue recommendations for program activities;



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- D) coordinate proposed activities (both short and long range) involving the Siletz Tribe, local community and SCHC;
  - E) review and monitor clinical data processes;
  - F) identify and evaluate problems or concerns in the care of patients;
  - G) recommend measures to resolve identified problems; and
  - H) review Because We Care forms quarterly to monitor trends and outcomes.
- c. Provider (Medical Staff) Meetings. These meetings are conducted at least semi-annually.
- i. Participants consist of all allied and active staff and other staff as appropriate.
  - ii. There are various sub-committees including Clinical Care Review Committee, Provider Meeting and Pharmacy and Therapeutics Committee.
  - iii. The functions and membership of these committees are defined in the Medical Staff Bylaws.
  - iv. The Medical Director may appoint special subcommittees and define their membership.
- d. Safety/Infection Control Committee. These meetings are conducted monthly with membership and functions described in the Risk Management Policy.
- e. Program Meetings. Each program area conducts meetings as necessary. SCHC is closed to patients on Friday mornings so staff are available for meetings and administrative work.
- f. PRC Gatekeeper. These meetings are conducted weekly.
- i. The committee consists of Medical Director, Health Director, Dental Director as needed, and Mental Health Therapist as needed.
  - ii. The committee reviews Purchased/Referred Care requests.

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- g. Health Committee (Appointed Standing Committee by Tribal Council). These meetings are usually conducted the first Monday of the month.
  - i. The Health Director, Administrative/QI Coordinator and Administrative Assistant attend the meetings as staff.
  - ii. Functions include reviewing policies, providing support for the implementation of plans and procedures that affect the delivery of health care, serving as appeal board for Purchased/Referred Care denials, and reporting regularly to the Tribal Council.
- h. Minutes are posted under J:\Reports\_Forms\_Minutes\Meeting Minutes. If an employee cannot attend due to illness or vacation, it is the employee's responsibility to read the minutes and become familiar with the topics discussed through communication with the supervisor and/or administrator.

#### **D. All Staff Trainings**

1. Employees are responsible for maintaining technical proficiency in their field of practice.
2. SCHC enhances the employees' technical proficiency by offering training opportunities.
3. Training opportunities are offered quarterly and as needed.
4. Training is mandatory for clinic staff to include, but is not limited to full-time, part-time, temporary, on-call and contract staff.
5. The following individuals may participate in the trainings:
  - a. Work experience participants
  - b. Higher education students
  - c. Volunteers
6. All staff trainings shall include, but are not limited to, a combination of videotapes, lectures, meetings with sales representatives and assigned readings.
7. All staff training is offered in the following areas: computer security, crisis response, cultural competency, emergency preparedness, fire safety and fire extinguisher, fraud, waste, and abuse, confidentiality, hazardous materials communications and infection control.

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8. Additional topics are approved by the Administrative/QI Coordinator and can include:
  - a. Changes in clinic policy and procedures
  - b. Results of audits
  - c. Topics of current interest
  - d. Health education and health promotion
9. Outside Training and Continuing Education

See CTSI Personnel Manual Part 4 Employees Training and Orientation.

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### **XIII. EQUIPMENT AND INVENTORY**

#### **A. Purpose**

Certain types of equipment are identified, tagged and tracked from the initial acquisition through final disposal.

#### **B. Policy**

It is the policy of the Siletz Community Health Clinic (SCHC) to manage property belonging to SCHC to reduce the risk of loss.

#### **C. Tagging, Disposing, Loans**

1. The following types of items are tagged:
  - a. Any item tagged by CTSI Accounting, to include personal property with an actual value of \$5,000 or more, and all physical property related to the computer and automated data processing system of the Tribe. (See CTSI Tribal Plan of Operations Manual);
  - b. All computer monitors, printers and other portable computer equipment except standard mice and keyboards;
  - c. Cameras, audiovisual equipment and other electronic devices;
  - d. Medical, dental and exercise facility equipment that needs to be tracked for warranty, update and/or recalls, safety or legal purposes; and
  - e. Other equipment where inventory tracking will ease management in locating the item, serial numbers, or date purchased.
  
2. Disposing of or excessing property is accomplished in accordance with CTSI policies.
  - a. Computers and other electronic equipment or media that contain or may contain sensitive data is wiped before being excessed or disposed.
  - b. If the data cannot be wiped electronically, the hard drive or other electronic media containing potential sensitive data is physically destroyed beyond all possibility of recovery.
  - c. Sensitive data includes, but is not limited to, ePHI (electronic Protected Health Information), user data, network information, user accounts and licensed software.

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### 3. Equipment Loans

- a. Equipment may be loaned with approval from supervisor or other appropriate staff.
- b. A loaned equipment log is maintained by the Site Manager.
- c. An agreement accepting financial responsibility during the loan of equipment is signed by the borrower when deemed appropriate by the clinic.

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#### **XIV. CHARACTER INVESTIGATIONS**

- A. The clinic shall identify those positions that permit regular contact with or control over Indian children. (42 CFR § 136.404(b))
- B. Individuals who are employed or being considered for employment in a position that involves regular contact with or control over Indian children under the age of eighteen, shall be subject to an investigation of the character of the individual. (42 CFR § 136.404(b))
- C. The clinic shall employ only individuals who meet standards of character that are no less stringent than those prescribed by the regulations outlined at 42 C.F.R. §136.404 and only after an individual has been the subject of a satisfactory background investigation as described in 42 C.F.R. §136.406. (42 CFR § 136.404(b))
- D. The background investigation includes a review of the following:
  - 1. The individual's trustworthiness, through inquiries with the individual's references and places of employment and education;
  - 2. A criminal history background check, which includes a fingerprint check through the Criminal Justice Information Services Division of the Federal Bureau of Investigation (FBI), under procedures approved by the FBI, and inquiries to State and Tribal law enforcement agencies for the previous five years of residence listed on the individual's application; and
  - 3. A determination as to whether the individual has been found guilty of or entered a plea of nolo contendere or guilty to any felonious offense or any of two or more misdemeanor offenses under Federal, State, or Tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact, or prostitution; crimes against persons; or offenses committed against children.

(42 CFR § 136.406)

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## **XV. MEDICARE REIMBURSEMENT**

### **A. Admission**

#### 1. Policy

It is the policy of the Siletz Community Health Clinic (SCHC) to provide low-barrier access to health care services for Siletz Tribal Elders by reimbursing the reasonable out-of-pocket cost associated with Medicare Part B and Medicare Part D.

#### 2. Admission Criteria

- a. An enrolled member of the Confederated Tribes of Siletz Indians.
- b. Qualify for Medicare.
- c. Forward a copy of the letter received from Social Security or Part D coverage provider.

### **B. Reimbursements**

#### 1. Policy

It is the policy and intent of this program to provide affordable access to health care for those who may be without, penalized, or placed in undue hardship.

#### 2. Allocation

SCHC will reimburse Medicare Part B and Part D premiums as a nontaxable direct payment to Tribal Membership as follows:

- a. Those admitted and having sent satisfactory paperwork to SCHC.
- b. All Tribal Members qualify for the Medicare Part B premium established by the Federal government.
- c. Medicare Part D is a case-by-case basis, as SCHC would prefer all Tribal Members to use the SCHC Pharmacy as there are mailing, curbside pick-up, and walk-in options.
- d. Reimbursement is delivered same as Tribal Elder stipends on the first of the month after admission to this service. If not, then a Tribal Elder will need to be setup direct deposit.

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### 3. Exemptions

SCHC will not reimburse Medicare Part B and Part D to Tribal Elders as follows:

- a. Premiums accrued prior to admission to this program will not be covered.
- b. Premium reimbursements will not be pro-rated for partial months.
- c. Medicare supplements are not allowable.
- d. Fees or increased percentages for untimely filling are not covered.

### 4. Income-Related Adjustments

In general, SCHC will not cover income-related adjustments on Medicare Part B premiums. The Federal Government assesses income-related monthly adjustment amounts based on individual tax history. A waiver for this exclusion can only be obtained if the income-related monthly adjustment amount places the Tribal Member in financial hardship.

- a. This waiver can be obtained if the individual seeking this reimbursement is at, or below, the State of Oregon guidelines for Oregon Health Plan enrollment. As the intent of this policy is to provide seamless health care without placing the Tribal Member in hardship.
- b. The necessary documents include current pay stub or bank statement showing monthly deposits.
- c. The SCHC Health Director will sign the waiver as approved or denied. This decision may be appealed to the Chief Executive Officer of the Tribe.



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## **XVI. POLICY APPROVAL**

### **A. Purpose**

Policy refers to what is to be done. Procedure refers to how it is to be done. Policy needs to be agreed upon by the administration and made available to all involved personnel. Published policies promote uniform application and avoid problems that occur with interpretation of informal or verbal policies.

### **B. Responsibility**

The Administrative/QI Coordinator is responsible for the following:

1. Conducting a review of policies;
2. Distributing proposed new and revised policies to relevant employees for review and comment prior to submission for approval by Health Committee and Tribal Council;
3. Distributing new or revised policies to relevant employees once approved; and
4. Saving new or revised policies to the appropriate electronic folder.

### **C. Policy Approvals**

1. SCHC

Policies are reviewed by the Planning and QI Committee and relevant staff before submission to the Health Committee.

2. Health Committee

The relevant clinic director or program supervisor presents new and revised policies to the Health Committee for review and approval.

3. Siletz Tribal Council

The Health Director presents new and revised policies to the Siletz Tribal Council for review and final approval.

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## **XVII. PROCEDURE APPROVAL**

### **A. Procedure Approval**

#### 1. SCHC

Procedures are reviewed by the Planning and QI Committee and relevant staff before submission to the Health Committee.

#### 2. Health Committee

The relevant clinic director or program supervisor presents new and revised procedures to the Health Committee for approval.

### **B. Siletz Tribal Council Delegation**

The Siletz Tribal Council delegates, to the Health Committee, the authority to approve procedures.

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### **XVIII. APPEAL**

If appeal rights are not defined in a policy the clinic shall follow the process outlined in the Tribal Administrative Procedures Ordinance for all patients.