



PURCHASED/REFERRED CARE (PRC) CONTRACT

Tule River Indian Health Center, Inc. will not authorize payment and will deny Purchased/ Referred Care (PRC) to individuals if the steps below are not followed:

1. Must have complete Patient Registration, Indian Documentation, Birth Certificate, Social Security, Residency Verification, valid Picture Identification and Alternate Resource or screening on file to be eligible for PRC.
2. PRC can only authorize Level I Emergency/Acutely Urgent care, Level II Preventive Care and Level III Primary and Secondary Care. Only the Tule River Indian Health Board (TRIHCB) can change levels of care, they are based on availability of funds.
3. Must complete an annual visit within the TRIHCI organization. i.e. medical, dental, behavioral health, or optical to keep status as Purchased/Referred Care eligible.
4. Must be screened for an alternate resource. **Required to apply annually** for the alternate resource if there is a reasonable indication that one exists, **if you refuse or fail to comply** in providing the required paperwork **you will be denied PRC eligibility. Tule River Indian Health Center Inc. will be required to be the Primary Care Provider (PCP) for all manage Medi-cal patient/client.** Contact our Benefits Coordinator for assistance.
5. Must utilize all alternate resources (i.e. Medicare, Medi-Cal, Insurance, Veterans, County and State Programs).
6. Must be seen within the Tule River Indian Health Clinic for Referrals for Specialty Care.
7. Must have a Purchase Order from the PRC Department before **all** outside provider visits.
8. Must notify PRC Department within 72 hours of emergency care. Elders and disabled have 30 days to notify the PRC Department. Eligibility will then be verified by the PRC Department.
9. Must live within the PRCDA (**Tulare County**).
1. **A full-time student away at school are required to turn in a copy of their transcripts.**
2. **It will be your responsibility to follow up with the PRC Dept. when you submit your bills. Everyone is responsible for bringing in their itemized bills/claims and EOB's (explanation of benefits) from the insurance company for payment processing. Without both documents, your bills will be on hold until we receive all the related paperwork, or your bills will be returned to you. **Bills over two (2) years old will not be covered.** TRICHI is not a private insurance company, rather a payer of last resort and proper documentation is required in order to process payment.**

Pursuant to the eligibility criteria you acknowledge you will submit pertinent paperwork/information within thirty (30) days in order to be qualified for PRC when notified.

I have read, received, and understand all Purchased/Referred Care Policies. I agree to follow all guidelines that are required of me.

Printed Patient Name

Patient or Guardian Signature

Date

MSC: Jeanne Baga/Barbara Baga; 6-0-0

(Approved 08/20/2025)