

**CHAVES COUNTY INDIGENT HOSPITAL
HEALTH CARE BOARD MEETING
NOVEMBER 19, 2009 8:30 A.M.**

Call to Order
Determination of Quorum

I. Approval of minutes for October 15, 2009

**II. Presentation of Claims
(Meeting will be closed in the event any claim has to be reviewed specifically.)**

A. SOLE PROVIDERS (FOR APPROVAL ONLY)

E.N.M.M.C.	Exhibit "I"	\$ 559,404.91 (221)	
E.N.M.M.C.-SUNRISE/PRENATAL	Exhibit "J"	\$ <u>22,127.70 (21)</u>	
	TOTAL	\$ 581,532.61 (242)	

TOTAL BILLED AMOUNT PROCESSED FOR E.N.M.M.C. \$ 1,127,064.37

B. NON-SOLE PROVIDERS (APPROVAL FOR PAYMENT)

AMBULANCE CORPORATION	Exhibit "A"	\$ 1,098.49 (2)	
COVENANT HEALTH SYSTEM	Exhibit "B"	\$16,469.28 (2)	
ENCHANTMENT AVIATION INC.	Exhibit "C"	\$15,000.00 (3)	
FRONTIER MEDICAL HOME CARE	Exhibit "D"	\$ 7,549.97 (12)	
LA CASA DE BUENA SALUD	Exhibit "E"	\$67,193.85 (226)	
LUBBOCK COUNTY HOSPITAL	Exhibit "F"	\$ 285.24 (1)	
PATHOLOGY CONSULTANTS OF NM	Exhibit "G"	\$ 820.94 (11)	
PLAINS REGIONAL MEDICAL CENTER	Exhibit "H"	\$ 3,886.66 (1)	
ROSWELL MEDICAL CARE	Exhibit "K"	\$12,994.03 (37)	
ROSWELL REGIONAL HOSP.	Exhibit "L"	\$59,363.75 (22)	
RURAL RADIOLOGY ASSOC.	Exhibit "M"	\$ 1,082.66 (16)	
SOUTHERN NM REHAB CENTER	Exhibit "N"	\$ 3,455.23 (1)	
SUPERIOR AMBULANCE	Exhibit "O"	\$ 7,062.69 (15)	
TOWN OF HAGERMAN-AMBULANCE	Exhibit "P"	\$ 465.23 (1)	
UNIVERSITY OF NM HOSPITAL	Exhibit "Q"	\$15,925.85 (2)	
WENNER, DONALD M.D.	Exhibit "R"	\$ 622.75 (1)	
WHITWAM, PAUL M.D.	Exhibit "S"	\$ <u>113.95 (1)</u>	TOTAL
\$213,390.57 (354)			

III. DENIED: 09-2630-1, 09-2906, 09-1904-3, 09-2205-2

IV. Review of Claims aging monthly report

<u>Sole Community</u>	(Liability)	<u>Other Providers</u>		(Liability)
0-30 Days 0 \$ 0.00	(0.00)	0 \$ 0.00	(0.00)	
1-60 Days 0 \$ 0.00	(0.00)	0 \$ 0.00	(0.00)	
61-90 Days 0 \$ 0.00	(0.00)	0 \$ 0.00		(0.00)
Over 90 Days 0 \$ 0.00	(0.00)	0 \$ 0.00	(0.00)	

V. Financial Reports

CHAVES COUNTY COMMISSION
MEETING JULY 16, 2009
8:30 A.M.

Claim #09-1902

Provider: ROSWELL REGIONAL MEDICAL CENTER
Amount Billed: \$6121.58 (County Portion \$4,713.62)
Date of Service: 02/12/09

Complaint:

Roswell Regional Hospital is requesting that claim #09-1902 be reviewed and processed as an exception. On March 11, 2009 Chaves County received 3 claims from Roswell Regional for this patient with the exception of the claim in question. All claims, along with numerous claims for other providers were processed on 03/19/09. At that time, patient maxed out the annual \$15,000 allocation for the Fiscal year. Chaves County has requested the original confirmation sheet for the account in question. According to provider the document is not available. IHC staff has searched through all of the chart and records searching for this account and has determined that this account was never been submitted for payment. Provider has sent a letter for your review requesting an exception and is attached for your viewing.

Recommendation:

Staff recommends that Commission deny claim #09-1902 for payment. Claim is past the 90 day filing limit and never submitted for payment. Also please note patient had maxed out \$15,000 allocation for FY 08-09 and if payment were to be made it would have to be made out of the new allocation money for FY 09-10. Staff also recommends that Roswell Regional write off the balance of this account due to patient complying with all requirements and this situation was out of her control.

Denied: _____

Approved: _____

**DUE TO YEAR END
CLOSEOUT THE
FINANCIAL REPORTS WILL
NOT BE AVAILABLE UNTIL
THE JULY 16TH IHC
MEETING. WE APOLOGIZE
FOR THE INCONVENIENCE.**

