



Native Village of Chitina

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Title: Specialty Care Program Policy & Procedures	Implementation Date: November 18, 2023	Page Number: Page 1 of 1
Department: Health	Review Date: 11/18/2026	Revise Number: 01

Purpose: Define the Specialty Care Program and services and document NVC's policy and eligibility requirements for accessing Specialty Care services.

Scope: Under its Title I authority, NVC has developed a program to provide Specialty Care Program services that are beyond the scope of Purchased and Referred Care.

Specialty Programs: Specialty Care Program services are provided as funding permits for NVC enrolled Tribal members or IHS beneficiaries in the service area & Copper River area who have been determined to meet the eligibility criteria. Specialty Care Services include optometry, audiology, dental, laser eye care, and cancer/life threatening treatment support services. IHS beneficiaries residing in Alaska are encouraged to contact NVC's Health Clinic for information on the application process for meeting the eligibility criteria for Specialty Program Services.

Eligibility Requirements:

Beneficiaries must meet the following requirements to be eligible for assistance for the Specialty Program:

Documents needed to determine eligibility:

Proof of Residency: The beneficiary's primary and physical residence must be in the Copper River Area for a minimum of six (6) months and show proof of residency. Documents that may determine residency include rent receipt, notarized statement from landlord, electric bill showing physical address in applicant's name, voter registration card showing physical address or telephone bill showing physical address in applicant's name.

Proof of Tribal Enrollment: Must be a Native Village of Chitina tribal member.

To meet the following requirements to be eligible for assistance for the Specialty Program:

Title: Specialty Care Program

☐ **Eligibility Registration Form:** Is required to determine eligibility for NVC's Specialty Program. Incomplete applications will be returned to sender with a notice of missing documents.

☐ **Certificate of Indian Blood**

Definitions: none

References: Refer to each Specialty Program Services policy for information and requirements governing each service.