

TRIBAL CARE COORDINATION ANNUAL REPORT, AUDITS, & FUND DISTRIBUTION POLICY

PURPOSE

This policy describes roles and responsibilities for North Dakota Medicaid, and tribes related to annual reporting, audits, and tribal care coordination fund distributions.

APPLICABILITY

The policy applies to all North Dakota federally recognized tribes who have entered into a Tribal Health Fund Agreement with ND Health and Human Services (HHS) related to tribal care coordination agreements and [N.D.C.C. § 50-24.1-40](#).

DEFINITIONS

Care coordination agreement - means an agreement between a health care provider and tribal health care organization which will result in 100% federal funding (FMAP) for eligible medical assistance provided to an American Indian.

Fiscal year – means from October 1st to September 30th.

Tribal Health Fund Agreement – means an agreement between a tribe and ND HHS which allows for annual distribution of the 80% state savings resulting from federal funding received due to care coordination requests specific to individual tribes.

ANNUAL REPORT

Submission by tribes

[SFN 1115](#), the ND Medicaid Tribal Care Coordination Fund Annual Report, is due by November 15th each year. The form must be filled out in its entirety and detail spending of previously distributed Tribal Care Coordination funds during the most recent distribution period. Reports must be received by November 15th to qualify for a distribution in January.

ND Medicaid review and response

ND Medicaid will review each tribe's submitted annual report and respond in writing within 30 days. The written response will either:

- confirm the funds have been used for purposes consistent with the law and agreement, or
- confirm the funds were used for purposes inconsistent with the law and agreement. ND Medicaid will detail the amount of any funds used inconsistently that will be withheld from future distributions.

Plans for distribution of a tribe's accrued Tribal Care Coordination Fund dollars will begin upon confirmation that reported fund spending is consistent with purposes in the law and agreement. Any funds used for purposes inconsistent with the law and agreement will be identified and withheld by HHS from future distributions as necessary to account for the inconsistently used funds. See [N.D.C.C. § 50-24.1-40\(3\)\(e\)](#).

TRIBAL CARE COORDINATION FUND DISTRIBUTIONS

Initial Fund Distribution

There will be an initial fund distribution per each Tribal Entity Agreement for Tribal Health Fund. Distribution of funds will be in proportion to the federal funding received from the Care Coordination Agreement requests for services originating from within that tribal nation.

Once an initial fund distribution has occurred, the tribe's duty to submit an annual report detailing its use of the funds begins. Reports are due by November 15th of each year.

Subsequent Distributions

Funds equal to each tribe's 80% share will be distributed

- in January of each year for care coordination funds accrued during the previous fiscal year (October-September).

Here's an example of the reporting process and fund distribution.

- Tribe receives distribution in January 2025.
- Tribe reports on spending of these distribution funds no later than November 15, 2025, and will note any unspent carry-over funds.
- For this example, reported funding was spent per statutory purposes, and the report is approved.
- The tribe receives a full distribution in January 2026 which represents funds from the previous fiscal year.

Unspent carry-over funds

Tribes should identify any unspent funds to carry over to the next reporting year and report on those funds.

Late reports

ND Medicaid will have 30 days to review these reports and respond in writing. Funds not subject to withholding will be released as soon as is practicable after the 30-day review period.

Withheld funding due to improper use

When funds are withheld due to improper use, HHS shall distribute withheld funds when a future audit report indicates moneys distributed from the Care Coordination fund are used for purposes consistent with those in [N.D.C.C. § 50-24.1-40\(3\)\(a\)\(1\)](#).

AUDIT REPORTS

Tribes must submit an audit report every 2 years, beginning in 2026, to the Medicaid Tribal Liaison by **November 15th**. The audit must be conducted by an independent Certified Public Accountant (CPA).

Distributed Health Fund dollars may be used to fund this CPA audit. There is a section on the Annual Reporting form (SFN 1115) to report this.

REFERENCES

[SFN 1115](#) ND Medicaid Tribal Care Coordination Fund Annual Report
[Tribal Care Coordination Guidance](#)
[Tribal Care Coordination Billing Guidelines](#)
[Tribal Care Coordination FAQ](#)

CONTACT

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FAQS

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A: