

National Council of Chief Executive Officers

Monthly Tele-Conference Meeting
 Toll Free #: 866-754-5692
 Participant Code: 2136254

DATE: May 3, 2011
 TIME: 12:00 pm EST; 11:00 am CST; 10:00 am MST; 9:00 am PST

Meeting Minutes

I. ROLL CALL

<u>NCCEO Officers:</u>	<u>P</u>	<u>A</u>	<u>Area Representatives</u>	<u>P</u>	<u>A</u>
Bryce Redgrave, Chair	x		Bill Pourier, ABR		x
Vacant, V-Chair			Michael Christensen, AK	x	
Alan Barlow, Secretary		x	Dorlynn Simmons, ALB		x
Yvonne Misiaszek, P-Chair		x	Gary Wabaunsee, BEM		
			Debbie Bends, BIL	x	x
Sandra Lahi-NBOC			Molin Malicay, CAL		x
Gary Wabaunsee-CHSO			Tonya Cornwell, NAS		x
			Bennie Yazzie, NAV	x	
			Travis Scott, OKC		x
			De Alva Honahnie, PHX		x
<u>IHS HQ Staff:</u>			Shirley Alvarez, POR	x	
Michael Weahkee-HR		x	Patti Whitethorne, TUC	x	
Liz Fowler-UFMS		x			
Kenneth Cannon-UFMS		x			
Robert McSwain, DDMO	x		<u>Additional CEO Members</u>		
John Rael, ORAP			Angela Young, Dallas	x	
Dr. Karol	x		Jeff Bingham, BEM	x	
Dr. Avery	x		Jeff Parolla	x	

II. APPROVAL OF AGENDA

There was consensus to approve the agenda as submitted.

III. REVIEW/APPROVAL OF PREVIOUS MEETING MINUTES

No meeting minutes to approve and will be tabled until next conference call. Repeat from last call.

IV. OLD BUSINESS

- 1) National Combined Councils (NCC) Meeting - Dr. Charlene Avery

NCC Update - Dr. Avery stated that the NCC meeting would commence on July 26 and end on July 28, 2011. The planning for this meeting has started and will need to be final approved shortly. The first two days will be dedicated to IHS topics, individual council activities, breakout sessions and a 30 minute time slot to meet with the IHS Director. The third day will be devoted to training for managers. Dr. Avery stated that the NCC will be a business meeting and will be more administrative and managerial in nature as opposed to clinical. The clinical component will be shifted to the GPRA best practices or Advances meeting, whereas the monthly CMO rounds will help cover clinical components of the IHS system. Behavioral Health will remain as its own entity and the Information Technology (IT) conference will cover Meaningful Use and other areas related to IT.

Bryce Redgrave asked if the 30 minutes with director will be on the second day so that the councils will have some working time to prepare for the Director. Dr. Karol indicated that nothing was set at this time, but she will follow up with the Director for clarity. Dr. Karol indicated that the Director may start in the afternoon the first day, but that her schedule will be flushed out soon. Dr. Karol encouraged the councils to get their questions organized and forward to her before the meeting with the Director to maximize their time together.

Bryce Redgrave explained that the CEO charter was expanded to be inclusive of Tribal and Urban leaders and questioned if this meeting was open to all ITU's. Dr. Karol affirmed that Tribal and Urban programs are welcome and that this is one of the agency priorities to renew and strengthen our partnerships with Tribes. The goal is to incorporate the ideas and thoughts from all ITU programs into this national meeting.

V. NEW BUSINESS

1) HQ Reports

a) ORAP: John Rael

John Rael could not join the call. Bryce Redgrave reminded CEO's to complete the online internal controls report that is due on May 13, 2011. Some Service Units still have pending sections that are not complete.

b) HR: Michael Weahkee

No Update by Michael Weahkee - absent

c) UFMS:

No update by Liz Fowler - absent

d) DDMO - Bob McSwain

Bob McSwain indicated that the All Inclusive Rates (AIR) for 2011

were now been published in the federal register. He noted that IHS received modest increases of about 2% in the lower 48 and about 7% in Alaska for both inpatient and outpatient and that these rates were retroactive to January 1, 2010.

HR - Bob McSwain indicated that IHS was evaluating the metrics that would be used to monitor hiring times. These would be used to judge efficiency of the five systems (IHS being one of them). He noted that the department has got in front of the OPM reviews regarding the Delegated Examining Unit authority, whereas the last review was done in the Portland Area. As explained, HHS will be taking the lead and reporting back to OPM, rather than OPM doing the reviews directly. Bob McSwain also provided progress on the standardized PD progress which will help the front end of getting job vacancies announced. The current hiring time is around 140 days, whereas 30 days per year over the next two years need to be met to be on target for the 80 day hiring time line for the agency. Bob noted that some internal intricacies such as the Indian Preference laws requires additional effort for every position and as a result may delay the hiring times somewhat. He also noted that Dr. Roubideaux has made this HR reform a top priority. Bob McSwain noted that 15 years ago IHS was about 15,000 employees and since then Tribes have taken over 50% of the program yet IHS still remains over 16,000 employees.

Budget - Bob McSwain indicated that this was an unusual year with a Continuing resolution (CR) that lasted for over half of the year until congress enacted 2010 spending levels. IHS can relax regarding government shutdown, but future apportionments are still uncertain. He indicated the downside is that we are not getting current services for population growth, inflation and pay was flat this year in 2011. He indicated that a lot of issues are going on at the hill regarding the debt ceiling. IHS was asked to submit an operating plan for the rest of the year, which was submitted up through the department and onto OMB. When approved apportionments are complete preference will be given to Tribal programs and allotted within 10 days. He Projects the funds will come in the later part of May or early June. He noted an increase of 25 Million for IHS, but after the rescission it amounted to approximately 16 million for 2011 (increase). He stated that services and facilities received higher consideration for funding then other line items. He noted that IHS is entering another year of Audits which will start in the next month and that Liz Fowler will provide more information on subsequent calls.

Commissioned Officers - Bob McSwain indicated that CAPT Lincoln started a commissioned officer (CO) list serv to communicate important activities. The CO's recently communicated their top 5 priorities and shared survey results. He indicated that award recognition was a top issue for CO's and this needs to be improved going forward. Other priorities included reducing Hiring times, deployment opportunities and training. Bob will forward this to the CEO's at a later time. The Director is on a special group that advises the secretary on commissioned officers so this may help in addressing some of the priorities. He indicated that IHS has over 2,000 CO's serving in the IHS.

Bob McSwain noted that on May 9, 2011 the IHS Director will have been in her position for two complete years. He encouraged all CEO's to

check out the Directors Blog to keep updated on the latest agency news. He indicated this was forward and progressive thinking for the agency and an efficient means to communicate.

Debby Bends asked when the Billings Area would hear back on the administrative review that was recently done. Bob stated the notion of performing area reviews was an outgrowth of SCIA's. Members from this committee want to see how IHS will address these issues in other areas. IHS has developed a review tool to address these findings from the Aberdeen experience. Albuquerque, Billings are done with Navajo being next for the review. Bob indicated that Athena Elliot and Dr. Annette are senior staff members on this internal committee. Bob indicated that Billings should be hearing back soon.

Bryce Redgrave asked if IHS was intending to mirror the HHS innovates recognition award called "Ready, Cert and Go." He mentioned he had shared this idea with Michael Weahkee as a novel approach to hiring staff for the agency. Bob McSwain stated that markers were simplified that were put in place and that IHS intends to pattern this process. Bob encouraged CEO's to review the department activities from time to time to stay current. Hot topics right now have to do with Patient safety and CEO's will be hearing more about this from IHS leadership.

Bryce Redgrave asked if there will be any follow up or look back to the work that was started at the HR Summit last July. Bob McSwain noted that it might not be in the same vein, because it was challenging to get all the staff to the meeting, but some look back would occur. He indicated that the Director is extremely concerned about getting staff hired. She sometimes hears stories from managers that improvement is slow and also that some applicants get tired of waiting to be hired and apply elsewhere. Bob explained that when UFMS started a lot of complaints were received, but because of training this greatly reduced the traffic. He mentioned that the UFMS model might offer some benefit to the HR reform efforts that are underway and could potentially be used as a model. He indicated that Denise Wells may be assisting with some of this training for IHS. Looking forward he indicated that IHS needs to have an adequate number of fully trained staff working in HR and that we can't expect our HR staff to solve all the hiring issues. It will require subject matter experts to be actively involved in the process and more responsibility will be placed upon the manager.

Bryce Redgrave asked if Bob had any recommendations for CEO's going forward regarding budget uncertainty. Bob McSwain noted that it behooves us to look at cost for purposes of carrying out our mission. We know we have hot spots around the system. Why can't we have a deployment team comprised of problem solvers that could also simultaneously train service units while they assist the different hot spots? He noted that it's difficult when Service Units are so thin with staff and are not exactly deep enough to allow staff to go to another site for training (cost and time). He encouraged CEO's on the call to think about how we can access training and skill building at the service units with low cost and low time commitment when we have patients that need to be seen. He noted that CEO's should be cautious going forward as AIR rates were modest. We also need to be looking at the requirements for Meaningful Use for purposes of obtaining those incentives. In closing Bob encouraged CEO's to look

at all opportunities to pull money into the system and maximize (optimize) the resources we do have.

VI. NCCEO Committee Reports

1) NBOC: Sandra Lahi

Sandra reiterated the AIR rates already mentioned. The NBOC call on April 5, 2011 discussed ICD-10 preparation. This deadline for implementation is October 2013. She indicated that more information and training will be shared as it becomes available. She also indicated that a work group will be meeting on May 9, 2011 to complete standardized PD's for business office categories.

Bennie C. Yazzie asked if these standardized PD's include coders. Sandra indicated that it might be health Information Management that would be looking into this, but she would check on this and get back to Bennie. Bennie Yazzie stressed the importance of the coder position in the revenue cycle and further noted that because of pay differentials that GIMC lost 3 certified coders to the private sector. He acknowledged that coder positions are more complex and demanding than in the past and should be carefully reviewed to see if they warrant a higher grade.

Bryce Redgrave asked about the practice management suite and how this was coming along. Sandra indicated that Phase I was complete and phase II would be forth coming regarding the patient GUI. She also indicated that work was done on 3rd party and accounts receivables packages, but that a redesign for a patient account system was not complete. Sandra will initiate an email to leads on these projects and connect Bryce Redgrave for further discussion.

2) CHSO:

No Update by Gary Wabaunsee - Absent

3) IHSL:

Bryce Redgrave indicated that updates provided on the IHSL call were very similar to what was provided today.

VII. OTHER AGENDA ITEMS (TIME PERMITTING)

Bryce Redgrave mentioned that the National Combined Councils meeting was in July and that the council needed to start preparing for this meeting. He mentioned that the NCCEO performed a demographics Survey that needs follow up and started a CEO Long-Term Training program that is not fully finalized. He encouraged CEO's to bring forth agenda items for discussion on the next NCCEO conference call.

VIII. ADJOURNMENT

The meeting adjourned at 1:05 pm EST.