## **Opening Statement**

## Indian Health Service Director-Designate Yvette Roubideaux MD MPH Senate Committee on Indian Affairs

## April 23, 2009

Chairman Dorgan, Vice Chairman Barrasso, and members of the Senate Committee on Indian Affairs: My name is Dr. Yvette Roubideaux, and it is an honor to appear before you today as President Obama's nominee to be the next Director of the Indian Health Service.

I am a member of the Rosebud Sioux Tribe, my father's tribe, and I am also part Standing Rock Sioux, which is my mother's tribe. I have a long history with the Indian Health Service – first as a patient, and then as a physician and medical administrator.

If confirmed, I look forward to working with your committee to do whatever we can to improve healthcare for American Indians and Alaska Natives. Even though we face enormous challenges, in this time of hope and change I believe we have a unique opportunity to begin the difficult work of restoring health and wellness to American Indian and Alaska Native communities.

I am grateful for all that your committee has done to improve the health of American Indians and Alaska Natives. I know you understand the significant challenges facing the Indian Health Service. It is a healthcare system that is confronted with all of the same challenges facing the U.S. healthcare system today. But the Indian Health Service, which is different from any other agency in the Department of Health and Human Services, also faces unique challenges. The Indian Health Service was established to meet the federal trust responsibility to provide healthcare to members of federally recognized tribes. The mission of the Indian Health Service is to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. However, this task has become increasingly difficult over time. Rapid population growth, increasing demand for services, skyrocketing medical costs, difficulties in recruiting and retaining healthcare professionals, long waits for referral services, and the growing burden of chronic diseases such as diabetes, obesity, and cardiovascular disease have created a significant strain on a system that is struggling to maintain current levels of services and, in some areas, faces reductions in services and potential closures.

Despite these challenges, I now see evidence of hope and change. As I mentioned, I have a long history with the Indian Health Service. I have seen up close the challenges of providing healthcare to this population with limited resources. However, I have also worked on a variety of projects and national initiatives over the past 16 years that have shown me the great potential that exists in the system to improve access to and quality of healthcare. I know that thousands of committed and dedicated career staff in the Indian healthcare system work hard every day to provide healthcare to their patients under difficult circumstances. And I know that many facilities and programs in the Indian Health Service have implemented innovative programs and have helped solve some of our greatest administrative challenges at the local level. We need to do more to learn from those successes and apply those lessons to other programs in the system. In addition, with a new Administration, strong allies in Congress, and renewed focus and energy on health reform from members of both parties, we have an opportunity to bring change to the Indian Health Service. President Obama is committed to ensuring that our First Americans have access to high-quality healthcare Even as a senator, he supported increased Indian Health Service funding and passage of the Indian Health Care Improvement Act. New leadership in the Department of Health and Human Services will provide desperately needed support and direction. Congress has already passed legislation – the American Recovery and Reinvestment Act – that included critical resources for Indian country, and many members have demonstrated a commitment to doing even more. And in listening sessions held with tribes during the Presidential Transition, I heard a great call for change and for a renewed effort to improve healthcare for our people. With this outpouring of support, I cannot help but feel that we are at a unique moment in time, where we have the potential to make great strides toward fulfilling the mission of the Indian Health Service, and toward improving the health of the American Indian and Alaska Native population.

I am ready to serve and to work with you to improve healthcare for American Indian and Alaska Native people. If confirmed, I plan to focus on four priority areas.

First, I plan to renew and strengthen the Indian Health Service's partnership with tribes. I believe the only way we can restore our communities to health is to work in partnership with them. Toward that end, I intend to work with tribes to review the existing tribal consultation

process and to find ways to make that process more meaningful so that we can work more closely together on the difficult challenges and decisions that face us in the coming years.

Second, as part of the effort to reform our national health system, I plan to begin discussions with our tribes, our healthcare providers, and our patients on how we can bring reform to the Indian Health Service. We need to undertake a comprehensive review of our system to determine how to better meet the needs of our patients within the parameters of both the broader reform effort and the available resources in our system. With respect to both the quality and delivery of care, I hope we can look at what we are doing well and do more of it, as well as understand what we are not doing well and come up with specific solutions. There may be difficult decisions ahead, but I am confident that, in partnership with our tribes and with Congress, this Administration can and will make the right decisions.

Third, if confirmed, I plan to make improving the quality of and access to care a primary goal of all of our work in the Indian Health Service. This has been a central goal of my work every since I decided to become a physician, and I believe it is a primary wish of our patients. In order to restore their confidence in our system, we have to demonstrate that we provide the high-quality care they know they deserve. We need to implement more strategies to increase access to care in our system, to improve the quality of clinical services that we provide, and just as importantly, to provide better customer service.

Finally, we need to ensure that what we do to improve the Indian Health Service is transparent and accountable, and that we are as fair and inclusive as possible in considering the needs of all our patients, whether they are seen in IHS direct service facilities, tribally managed programs, or urban Indian health programs.

I know we can make strides to improve care in the Indian Health Service. I have seen the best of what we can do in my work as the Co-Director of the Coordinating Center for the Special Diabetes Program for Indians Demonstration Projects. This \$27.4 million annual congressional appropriation created a grant program to translate scientific evidence into real world diabetes and cardiovascular disease prevention programs. This successful initiative has proven that when Indian Health Service and tribal and urban Indian programs are given needed resources and adequate technical assistance and support, they can step up to the plate, implement a complex set of evidence-based services, evaluate their activities, and deliver positive outcomes that exceed everyone's expectations. These programs demonstrated that the Indian health system has the potential to markedly improve the quality of healthcare it provides if given the support it needs to be successful.

I realize that we face enormous challenges and that this work will not be completed in a matter of days, weeks, months, or even years. But, if confirmed, I am ready to begin the important work of bringing change to the Indian Health Service. I know our patients are ready for it. And I know there are many tribal leaders, Indian healthcare staff, and providers who have ideas for how we can achieve that goal. I am confident that we can all work together in this effort, and I will rely on the guidance and support of this committee as we move forward.

Again, thank you for the opportunity to have a conversation about American Indian and Alaska Native healthcare today. I am happy to answer any questions.