



Welcome to the IHS/CAO Tribal Consultation





Margo Kerrigan (1953-2014)



Linda Wilson (1951-2014)



IHS Agency Priorities

- Renew and strengthen our partnership with tribes
- Reform the IHS
- Improve the quality of and access to care
- Make all of our work accountable, transparent, fair and inclusive



Agenda Overview

	Tuesday, March 24	Wednesday, March 25	Thursday, March 26
Morning	YRTC Updates	Reports from CA representatives to national IHS boards/committees/workgroups + voting, as needed	Tribal Listening Session with IHS Acting Director
Afternoon	Regional Tribal Caucus & Conferring Session with Urban Indian Healthcare Programs	Extreme Water Drought Conditions ACA and Legislative Update	Urban Conferring Session with IHS Acting Director



Conferring with the Urban Indian Health Care Programs

- Reauthorization of the Indian Health Care Improvement Act signed in to law by President Obama on March 23, 2010, requires IHS to confer with urban Indian organizations
- On July 12, 2012, IHS posted a draft policy on conferring with urban Indian organizations in the Federal Register and sent a letter to Tribes requesting consultation input



Conferring with the Urban Indian Health Care Programs cont'd.

- On January 22, 2013, IHS held a listening session at IHS Headquarters in Rockville, MD on the draft policy on conferring with urban Indian organizations
- On September 29, 2014, the final policy was published in the Federal Register

<http://www.gpo.gov/fdsys/pkg/FR-2014-09-29/html/2014-23005.htm>



DHHS Secretary's Tribal Advisory Committee

California Primary Representative: Elaine Fink, Chairperson
North Fork Rancheria

California Alternate Representative: Stacy Dixon, Chairman
Susanville Indian Rancheria

For more information, contact:

Stacey Ecoffey
Office of Intergovernmental Affairs
(202) 690-7410

Stacey.ecoffey@hhs.gov



California Representatives to National IHS Boards/Committees/Workgroups

Workgroup	Representatives
Contract Support Costs Workgroup	Chris Devers, Tribal Representative Pauma Yuima Band of Mission Indians Preston Pete, Finance Director Consolidated Tribal Health Project, Inc.
Budget Formulation Workgroup	Stacy Dixon, Chairman Susanville Indian Rancheria <u>Alternate:</u> Mark Romero, Chairman Mesa Grande Band of Diegueno Mission Indians
Purchased/Referred Care (Formerly CHS)	Mark Romero, Chairman Mesa Grande Band of Diegueno Mission Indians <u>Alternate:</u> Chris Devers, Tribal Representative (TBD) Pauma Yuima Band of Mission Indians



California Representatives to National IHS Boards/Committees/Workgroups

Workgroup	Representatives
National Behavioral Health Workgroup	Robert Marquez, Tribal Representative (TBD) Cold Springs Rancheria
IHS Director's Advisory Workgroup on Tribal Consultation	Charlie Wright, Chairman Cortina Rancheria <u>Alternate:</u> Teresa Sanchez, Tribal Representative Morongo Band of Mission Indians
Tribal Leaders' Diabetes Committee	Rosemary Nelson, Member Pit River Tribe <u>Alternate:</u> Dominica Valencia, Member Santa Ynez Band of Mission Indian



California Representatives to National IHS Boards/Committees/Workgroups

Workgroup	Representatives
Facilities Appropriation Advisory Board	Peter Masten, Jr., Tribal Representative Hoopa Valley Tribe <u>Alternate:</u> Michael Garcia, Vice Chairman Ewiiapaayp Band of Kumeyaay Indians
Tribal Self-Governance Advisory Committee	Ryan Jackson, Tribal Council Hoopa Valley Tribe <u>Alternate:</u> Robert Smith, Chairman Pala Band of Mission Indians



California Area Tribal Advisory Committee

Terms completed by:

Primary	Alternate
John Green	Cheryl Seidner
George Gholson	Michael Thom
Bonnie Hale	Richard Button
Robert Marquez	Vickey Macias
Silver Galletto	Loretta Harjo
Elizabeth Hansen	Desiree Schunke
Teresa Sanchez	Veronica Hicks
Diana Chihuahua	



2014 California Area Profile

- Indian Healthcare System:
 - Tribally-operated healthcare services:
 - 10 Title V compacts representing 42 Tribes
 - 31 Title I contracts representing 64 Tribes
 - 8 urban health care services and resource centers
 - 4 alcohol treatment programs
- Population Served:
 - Members of 104 federally recognized Tribes
 - 86,959 American Indians and Alaska Natives residing on our near reservations/rancherias
 - 6,833 American Indians in Urban clinics (users)
- Annual Patient Services (Tribal facilities)
 - Inpatient Admissions: N/A
 - Outpatient visits: 588,425
 - Dental visits: 216,587



Office of Public Health (OPH)

In FY 2014, the CAO provided technical assistance to 33 California healthcare programs using a certified **Electronic Health Record (EHR)**, including:

- Conducted 13 site visits which included training on meaningful use, EHR reminders, and improving clinic workflows
- Hosted 7 RPMS classroom trainings
- Installed 10 demo databases and over 70+ patches for the new certified EHR

In FY 2014, the CAO offered the following assistance with meeting **Government Performance & Results Act (GPRA)** measure targets and improving clinical care:

- Trained over 90 healthcare staff during 7 California-specific webinar sessions
- Trained over 200 healthcare staff nationwide during 6 national webinar sessions
- Offered 6 webinar trainings to individual sites
- Created and distributed site-specific dashboards to 30 programs reporting GPRA



OPH cont'd.

To support the **Improving Patient Care (IPC)** program in FY 2014, the CAO:

- Offered IPC training during site visits to 4 California tribal and urban Indian healthcare programs
- Offered technical assistance to California's IPC 5 and Quality & Innovation Learning Network (QILN) programs via one-on-one conversations and during 4 organized webinar training sessions
- Coordinated patient-centered medical home (PCMH) training for healthcare program staff at upcoming Continuing Medical Education Conference

In FY 2014, the CAO provided technical assistance to 37 community-directed **Special Diabetes Program for Indians (SDPI)** grantees. California is the only Area 100% submitted through web-audit.

In FY 2014, the CAO provided guidance on registering for electronic **immunization data exchange** with the California Immunization Registry, San Diego Immunization Registry, and the San Joaquin Immunization Registry.



Sanitation Facilities Construction (SFC)

SFC includes 14 engineers, 12 technicians, and 6 support staff stationed throughout California.

In FY 2014, the IHS/CAO funded 27 projects, serving 46 tribes with \$5,540,000.

In FY 2014, the IHS/CAO assessed all tribal drinking water systems, determined risk/vulnerability, and evaluated plans to address drought.



SFC cont'd.

There are still 3,668 homes in California without potable water. California's unmet need is \$304,122,319.

In FY 2015, the IHS/CAO is receiving the following construction allocation:

- | | |
|---------------------------|-------------|
| — Regular Funding | \$3,526,000 |
| — Housing Funding | \$1,740,000 |
| — EPA Clean Water Funding | \$3,800,000 |



Environmental Health Services (EHS)

Five professional environmental health officers, stationed at IHS field offices throughout California, completed 510 environmental health and safety surveys at tribal facilities in Fiscal Year 2014.

- Food service facilities (310)
- Indian gaming facilities (33)
- Swimming pools (25)
- Healthcare facilities (15)
- Grocery/convenience stores (15)
- Head Start programs (12)
- Motels/hotels (9)
- Other facilities (91)



Health Facilities Engineering (HFE)

In FY 2014, the IHS/CAO managed or provided technical assistance with:

- 8 facility improvement projects using M&I funds
- 4 new facility construction/expansion projects
- 4 new facility construction projects: facility condition surveys
- 6 new facility construction projects: planning and design

In FY 2014, the IHS/CAO managed \$4.69 million to improve Indian healthcare facilities throughout California. Of that total:

- | | |
|----------------|-------------------------------------------------------------------------------------------------|
| – \$ 3,028,000 | Maintenance & Improvement (M&I) projects |
| – \$ 848,000 | Annual Medical Equipment needs |
| – \$ 818,000 | General Equipment for 10 Indian health programs,
based on 12 new space construction projects |



Budget Transparency

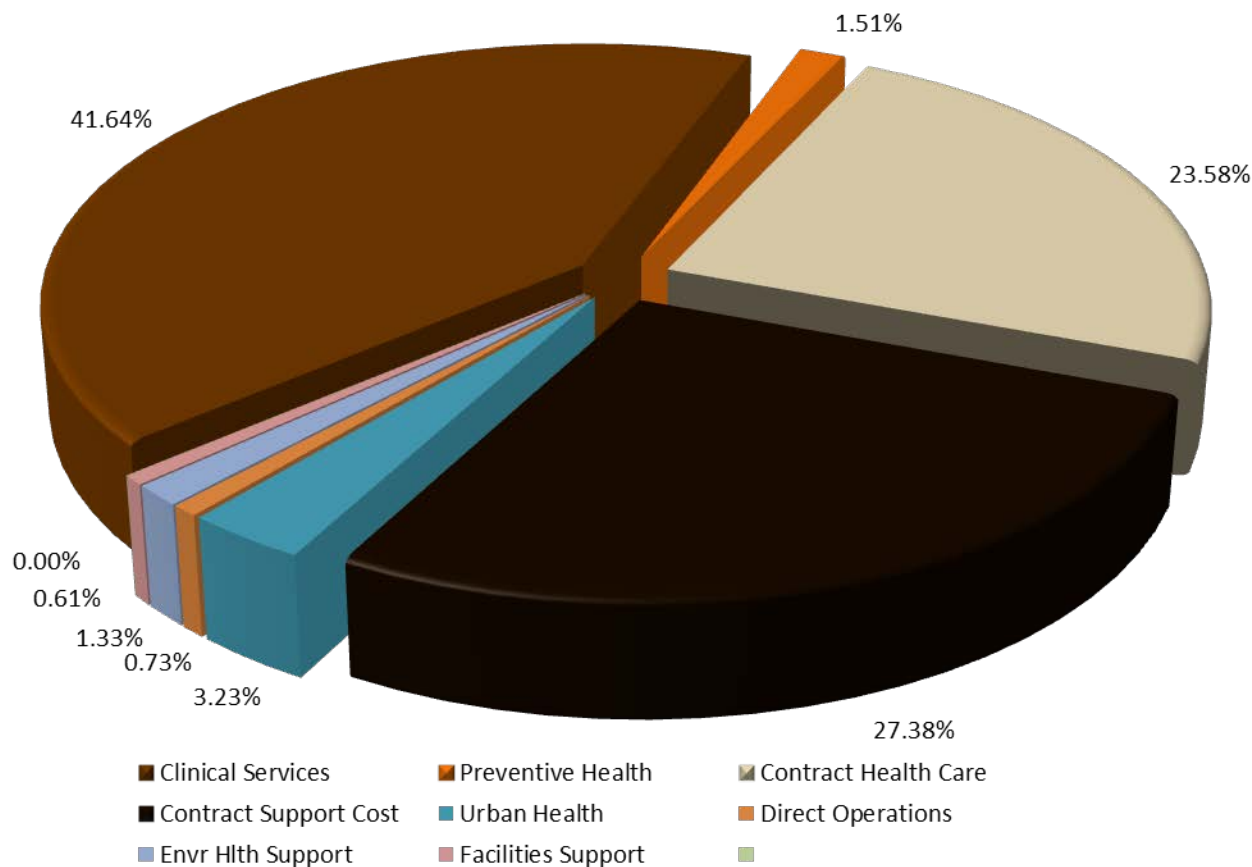
IHS/California Area Office Budget
Fiscal Year 2014

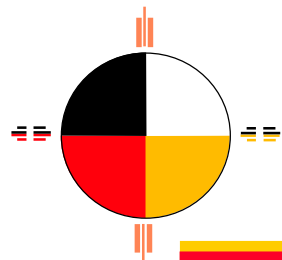
Activity	Recurring Budget	
Clinical Services	\$	84,112,200
Preventive Health		3,041,943
Contract Health Care		47,624,355
Contract Support Cost		55,296,475
Direct Operations		1,465,369
Urban Health		6,526,682
Environmental Health Support		2,677,907
Facilities Support		1,238,313
Total Recurring Budget	\$	<u>201,983,244</u>



Allocation of Funds

FY Ending September 30, 2014





FY 2015 Summary

Public Law 113-235



FY 2014 Final, Discretionary

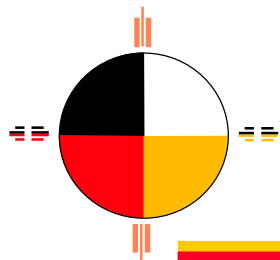
\$4,434,515,000

FY 2015 Final, Discretionary

\$4,642,381,000

+\$207,866,000 or 4.7%





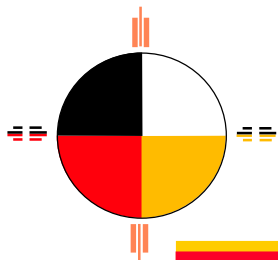
FY 2015 Summary of Changes



Funding Increases:

■ Adjustments	\$10,000,000
- restoration of reallocations to CSC in FY 2014	
■ Pay Costs	\$2,572,000
■ Staffing for New Facilities	\$70,818,000
■ New Tribes	\$8,015,000
■ Purchased/Referred Care	\$32,992,000
■ Urban Health	\$2,875,000
■ Indian Health Professions	\$5,000,000
■ Contract Support Costs	<u>\$75,594,000</u>
Total	\$207,866,000





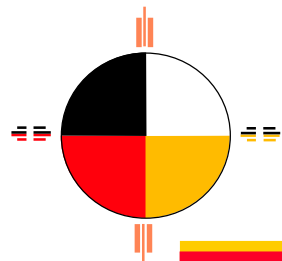
FY 2015 - Staffing for New Facilities



	<u>FTE/Pos</u>	<u>Dollars</u>
San Carlos Health Center, San Carlos, AZ	270	\$28,395,000
Southern California YRTC, Hemet, CA	35	\$3,200,000
MBCI Health Center, Choctaw, MS	101	\$10,958,000
<u>Kayenta Health Center, Kayenta, AZ</u>	<u>254</u>	<u>\$28,265,000</u>
TOTAL	660	\$70,818,000

Amounts reflect information known at the time of the FY 2015 President's budget submission to Congress (March 2014). Actual FY 2015 allotments will be based on facility construction completion and achievement of beneficial occupancy.





FY 2015 - HCFC

Health Care Facilities Construction

Gila River SE Ambulatory Care Center	\$2,726,000
Ft. Yuma, CA, Health Center	\$46,292,000
Kayenta, AZ, Health Center	\$18,869,000
<u>Northern California YRTC</u>	<u>\$17,161,000</u>
Total	\$85,048,000





Announcement The Southern California YRTC Now Has a Name

Desert Sage Youth Wellness Center

