Enclosure – DRAFT Functional Statements – IHS Headquarters Realignment (October 2015)

Part G—Indian Health Service

Part G, of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (HHS), as amended at 52 FR 47053–67, December 11, 1987, as amended at 60 FR 56606, November 9, 1995, as amended at 61 FR 67048, December 19, 1996, as amended at 69 FR 41825 July 12, 2004, as amended at 70 FR 24087 May 6, 2005, and most recently as amended at __________ is hereby amended to reflect a reorganization of the Indian Health Service (IHS) Headquarters (HQ). The goal of the reorganization is to ensure clear lines of authority to senior leadership and improve the Agency’s responsibilities for oversight and accountability. Delete the functional statements for the IHS Headquarters in their entirety and replace with the following:

Chapter GA – Office of the Director

Section GA-10, Indian Health Service—Organization

The IHS is an Operating Division within the Department of Health and Human Services (HHS) and is under the leadership and direction of a Director who is directly responsible to the Secretary of Health and Human Services. The IHS Headquarters consists of the following major components:

Office of the Director (GA), Chief Operating Officer (Gxx), Associate Director Quality (Gxx), Chief Medical Officer (Gxx), Associate Director Field Operations (Gxx), Associate Director Intergovernmental Affairs (Gxx), and Associate Director Analysis and Evaluation (Gxx).

Section GA-20, Indian Health Service—Functions

Office of the Director (OD) (GA)

Provides overall direction and leadership for the IHS: (1) Establishes goals and objectives for the IHS consistent with the mission of the IHS and ensures Agency performance is managed through goals/objectives, achievements, and/or improved outcomes; (2) provides for the full participation of Indian Tribes in the programs and services provided by the Federal Government; (3) develops health care policy; (4) ensures the delivery of quality comprehensive health services; (5) advocates for the health needs and concerns of American Indians/Alaska Natives (AI/AN); (6) promotes the IHS programs at the local, State, national, and international levels; (7) develops and demonstrates alternative methods and techniques of health services management and delivery with maximum participation by Indian Tribes and Indian organizations; (8) supports the development of individual and Tribal capacities to participate in Indian health programs through means and modalities that they deem appropriate to their needs and circumstances; (9) the IHS will carry out the responsibilities of the United States to Indian Tribes and individual Indians; (10) affords Indian people an opportunity to enter a career in the IHS by applying Indian preference; and (11) ensures full application of the principles of Equal Employment Opportunity laws and the Civil Rights Act in managing the human resources of the IHS.

Legislative Affairs (LA) (GAXX)

(1) Serves as the principal advisor to the IHS Director on all legislative and congressional relations matters; (2) advises the IHS Director and other IHS officials on the need for changes in legislation and
manages the development of IHS legislative initiatives; (3) serves as the IHS liaison office for congressional and legislative affairs with Congressional offices, the HHS, the Office of Management and Budget (OMB), the White House, and other Federal agencies; (4) tracks all major legislative proposals in the Congress that would impact Indian health; (5) ensures that the IHS Director and appropriate IHS and HHS officials are briefed on the potential impact of proposed legislation; (6) develops legislative strategy for key policy and legislative initiatives; (7) provides technical assistance and advice relative to the effect that initiatives/implementation would have on the IHS; (9) provides support and collaborates with OFA relative to IHS appropriations efforts; (10) directs the development of IHS briefing materials for congressional hearings, testimony, and bill reports; (11) analyzes legislation for necessary action within the IHS; (12) develops appropriate legislative implementation plans; and (13) coordinates with IHS Headquarters and Area offices as appropriate to provide leadership, advocacy, and technical support to respond to requests from the public, including Tribal governments, Tribal organizations, and Indian community organizations regarding IHS legislative issues.

Executive Secretariat (ES) (GAxx)

(1) Manages the processing of executive correspondence and related information to the IHS Director from Tribes and Tribal governments, Tribal and Urban Indian organizations, Federal departments and agencies, Congress and congressional staff offices, attorneys, patients, schools, universities, employees, grantees, contractors, and the general public; (2) reviews and monitors correspondence received by the IHS Director and assigns reply or follow-up action to appropriate IHS Headquarters program offices and IHS Area Offices; (3) ensures the quality (responsiveness, clarity, and substance) of IHS-generated correspondence prepared for the IHS Director’s signature by coordinating the review of integrity and policy issues, and performing standard edits and revisions; (4) reviews and coordinates clearance of decision documents for the IHS Director’s approval to ensure successful operations and policy-making within the Agency; (5) assists IHS officials as they prepare documents for the HHS Secretary’s review, decision, and/or signature; (6) serves as the Agency’s liaison with the HHS Office of the Secretary’s Executive Secretariat on IHS program, policy, and special matters; (7) performs special writing assignments for the IHS Director; (8) maintains official records of the IHS Director’s correspondence and conducts topic research of files, as needed; (9) oversees an electronic document handling system to assist in managing the timely processing of internal and external executive correspondence; (10) conducts training to promote conformance by IHS Headquarters and Area staff to the IHS Executive Correspondence Guidelines; (11) tracks reports required by Congress; (12) formulates, administers, and supports IHS-wide policies, delegations of authority, and organizations and functions development; (13) provides leadership, on behalf of the IHS Director, to functional area managers at IHS Headquarters in developing, modifying, and overseeing the implementation of IHS policies and procedures; (14) provides analysis, advisory, and assistance services to IHS managers and staff for the development, clearance, and filing of IHS directives and delegations of authority; (15) serves as principal advisor and source for technical assistance for establishment or modification of organizational infrastructures, functions, and Standard Administrative Code configurations; (16) manages the IHS’ overall regulations program and responsibilities, including determining the need for and developing plans for changes in regulations, developing or assuring the development of needed regulations, and maintaining the various regulatory planning processes; (17) serves as IHS liaison with the Office of the Federal Register on matters relating to the submission and clearance of documents for publication in the Federal Register; (18) assures proper Agency clearance and processing of Federal Register documents; and (19) manages the IHS
review of non-IHS regulatory documents that impact the delivery of health services to Indians including but not limited to access and civil rights aspects and State Medicaid waiver applications by coordinating with the OGC Public Health Division.

**Equal Employment Opportunity (EEO) (GAxx)**

(1) Administers the IHS equal employment opportunity, civil rights, and affirmative action and alternative Dispute Resolution programs, in accordance with applicable laws, regulations, and HHS policies; (2) plans and oversees the implementation of IHS affirmative employment and special emphasis programs; (3) reviews data and advises IHS managers of possible discriminatory trends; (4) ensures immediate implementation of required actions on complaints of alleged sexual harassment or discrimination; (5) decides on accepting, for investigation, or dismissing discrimination complaints and evaluates accepted complaints for procedural sufficiency and investigates and resolves complaints; (6) evaluates accepted formal complaints of discrimination for procedural sufficiency and adjudicates and resolves complaints; and (7) develops/administers equal employment opportunity education and training programs for IHS managers, supervisors, counselors, and employees.

**Public Affairs (PA) (GAxx)**

Serves as the principal advisor for strategic planning on communications, media relations, and public affairs policy formulation and implementation; (2) ensures IHS policy is consistent with directives from the Assistant Secretary for Public Affairs; (3) provides leadership and advocacy to establish and implement policy for internal and external dissemination of Agency information intended for public release or employee and stakeholder information; (4) serves as the central office for technical guidance and assistance to IHS staff for the development of public affairs and media communication; (5) coordinates public affairs activities with other public and private sector organizations; (6) coordinates the clearance of IHS public relations activities, campaigns, and communications materials; (7) represents the IHS in discussions regarding policy and public affairs initiatives/implementation; (8) provides technical assistance and advice relative to the effect public affairs initiatives/implementation would have on the IHS; (9) collaborates with the Division of Regulatory Affairs, for review and response to media requests received under the Freedom of Information Act (FOIA) or the Privacy Act, and ensures the security of IHS documents used in such responses that contain sensitive and/or confidential information; and (10) serves as the IHS liaison office for press and public affairs with HHS, IHS Area Offices, media and other external organizations and representatives.

**Chief Operating Officer (COO) (Gxx)**

The Chief Operating Officer (COO): (1) oversees and supervises the human resources, finance and budget, acquisitions and grants, information technology, and administrative services functions; (2) oversees development and implementation of administrative policies and procedures; (3) ensures Agency compliance with applicable laws, regulations, policies, and procedures governing the COO functions; (4)

**Office of Human Resources (OHR) (Gxxx)**
(1) Advises the Director, IHS, on HR goals, objectives, policies, and priorities of the Agency and the HR profession; (2) provides leadership, direction, and oversight of Agency-wide HR activities that support the IHS organization and programs; (3) develops and maintains strategic and operational HR plans to ensure a current and future work force for management, program delivery, and administrative support systems; (4) furthers the Agency’s Indian Preference by ensuring compliance with Indian Preference statutory and policy requirements; (5) develops, promulgates, and administers Agency HR guidelines, and instructions in accordance with Office of Personnel Management (OPM), HHS, Public Health Service policies and the Indian Health Care Improvement Act (IHCIA), as amended; (6) ensures consistency in recruitment, training, and development applications, approaches, and outcomes by administering an Agency-wide HR system of functional responsibility, authority, and accountability; (7) issues standards to monitor and evaluate all IHS training and development activities and ensures that expenditures for recruitment, training, and development support the Agency’s mission and goals; (8) provides Agency-wide policy guidance, consultation, and technical assistance on all IHS HR management, recruitment, and retention activities; (9) manages Agency work force information and conducts analyses, including trends analysis and forecasting necessary for Agency HR planning, management, and evaluation; (10) administers an Agency-wide information clearinghouse on HR recruitment, training, and development that serves all IHS organizations and Tribal health programs; (11) oversees the programs authorized under IHCIA Section 1612, administering the Agency-wide scholarship, loan repayment, professional recruitment and retention, training, and development systems; (12) administers human resources management operations and services for HQ organizational units; (13) ensures a safe, healthy, and productive work environment for IHS personnel to carry out their assigned duties and responsibilities, and that HR factors are part of the Agency’s decision making processes; (14) establishes and maintains liaison and coordination with a variety of public and private organizations to provide the IHS with up-to-date HR recruitment, management, training, retention and development technologies; (15) ensures that organization and program changes involve assessments of appropriate HR requirements, including work design, knowledge, skills, abilities, and work load; (16) prepares reports and studies reflecting IHS HR activities in response to the Congress, other Federal agencies, and Tribal Governments; and (17) provides leadership and direction to the IHS Regional HR Offices; (18) manages recruitment and performance management activities for Senior Executive Service positions; and (19) participates in cross-cutting issues and processes, including but not limited to, emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations and resolution of audit findings as may be needed and appropriate.

Division of Personnel Security and Ethics (DPSE) (Gxxxx)

(1) Advises the IHS Director and IHS management and supervisors of appropriate corrective and remedial actions to address or correct improprieties by Agency employees; (2) directs and provides leadership in the formulation of plans, guidance and evaluation of the IHS Personnel Security and Drug Testing Programs; (3) manages and directs the IHS “Ethics Program”, including the implementation of all ethics requirements, providing advice to the Agency on actions necessary to ensure compliance with ethics laws and policies, reviewing and approving public financial disclosure statements, supervising and auditing the confidential financial reports filed by regular and special government employees, reviewing and clearing all requests for approval of outside activity and requests to accept travel expenses from non-Federal sources, and training Agency employees on ethics statutes and regulations; (4) serves as the Agency liaison
with all outside investigative organizations related to personnel matters, such as the Office of Special Counsel, the Government Accountability Office (GAO) and the Office of Inspector General (OIG); and (5) administers and coordinates the IHS personnel security program including, administering and coordinating all background checks and adjudicates findings, coordinating with OPM on tracking background checks for all Agency personnel, and provides guidance for determining position sensitivity in accordance with OPM requirements for position sensitivity and public trust.

Division of Commissioned Personnel Support (DCPS) (Gxxxx)

(1) Acts as the liaison between IHS and the Office of the Surgeon General (OSG), Division of Commissioned Corps Personnel and Readiness (DCCPR), and Division of Systems Integration; (2) advises the IHS Director, Senior Staff, HQ Office Directors, Area Directors, supervisors, administrators, managers, officers and dependents regarding commissioned personnel benefits, policies, procedures, and regulations, as the IHS primary point of contact for commissioned personnel management; (3) develops Agency policies, procedures, and recommendations to Agency senior leadership regarding commissioned personnel management and provides recommendations to DCCPR regarding Commissioned Corps policy; (4) provides direct support to the IHS Director and/or the Agency representative to the Surgeon General’s Policy Advisory Council; (5) evaluates learning needs, produces resource materials and conducts training sessions on commissioned personnel issues for officers, supervisors, and commissioned personnel specialists in IHS Area Offices; (6) manages the Agency honor and service awards program for commissioned personnel; (7) facilitates and monitors the progress of Agency commissioned personnel adverse actions to assure accurate and timely completion; (8) prepares reports reflecting IHS Commissioned Corps activities in response to requests from Agency leadership, Congress, other Federal agencies, and Tribal Governments; (9) reviews and processes all commissioned personnel actions for the Agency; (10) develops and manages all Agency commissioned personnel direct access positions; (11) provides oversight and coordination of Temporary, Permanent, and Exception Proficiency Promotion processes; (12) acts as a subject matter expert and advises Agency travel officials on commissioned personnel travel and Joint Travel Regulations; (13) coordinates with DCCPR on all Agency deployment processes, obtains Agency approvals for officer deployments, and communicates with Agency leadership and officer supervisors on the status of deployment requests and operations; (14) facilitates and monitors all medical and compensation processes (including special pays) for accuracy, timeliness, and completion; and (15) advises Agency supervisors on the performance, discipline, and conduct of commissioned personnel.

Division of Human Resources Operations and Systems (DHROS) (Gxxxx)

(1) Provides overall leadership and direction for the IHS Headquarters HR program; (2) administers HR policies and regulations and develops Headquarters HR procedures as appropriate; (3) provides advice, consultation, guidance and assistance to IHS Headquarters Leadership on civil service HR issues, programs and policies; (4) provides leadership and direction to the IHS Regional HR Centers on HR systems; (5) manages the overall IHS personnel and pay action functions for civil service employees; (6) advises IHS leadership on HR systems solutions for IHS business needs; (7) provides project management for enterprise HR systems
and functional aspects of IHS public and internal web sites; (8) collaborates with business process owners to perform requirements analysis, selection, testing, implementation, deployment, and support and recommend future enhancements for HR systems and reporting solutions; (9) analyzes HR metrics/benchmarks, business practices, processes, and programs to enable the organization to make better decisions concerning our human capital resources; (10) provides HR advice regarding core operational functions and services (in the areas of strategic recruitment, staffing, delegated examining, position classification, payroll, timekeeping, performance management, awards, and Federal benefit programs), strategic human capital and workforce planning, succession planning, e-government HR initiatives and strategic planning for IHS HQ Offices; (11) provides advice, consultation, guidance and assistance to HQ Office Directors, management officials, employees and other customers on HR operational services, programs, and policies; (12) interfaces with staff of the other OHR Divisions and Branches to provide for a full range of HR operational services to the HQ; and (13) complies with Indian Preference statutory and policy requirements in HR practices.

Division of Workforce Relations and Policy (DWRP) (Gxxxx)

(1) Develops, administers and evaluates OHR policies for Agency-wide use and provides leadership to ensure implementation; (2) provides advice, consultation, guidance and assistance to IHS Leadership on OHR issues, programs and policies; (3) provides advisory and consulting services to IHS Leadership and Areas on policy and programs designed to recruit, compensate, and retain a highly qualified, motivated, and diverse workforce; (4) provides support and assistance to IHS leadership with planning and preparing IHS workforce programs; (5) responsible for the management of OHR delegations of authority; (6) develops and provides guidance and oversight for policy for Title 5 employment mechanisms, and coordinates HR programs and policies with HHS; (7) manages the IHS Labor-Management Relations program to include representing the IHS in matters involving labor organizations; (8) manages the IHS Employee Relations program, developing ER-related policies and guidance, providing training, and representing the IHS before third parties; and (9) responds to a variety of OHR issues and cases that arise from the IHS HQ and Areas that are precedent-setting, controversial, and/or require sensitive handling.

Regional Human Resources Offices (RHRO) (Gxxxxx)

Western Region (Gxxxxx); Northern Plains Region (Gxxxxx); Southwest Region (Gxxxxx); Navajo Region (Gxxxxx); Southeast Region (Gxxxxx)

(1) Provides overall leadership and direction for the IHS HR program within the established Region; (2) administers HR policies and regulations and provides leadership to ensure implementation; (3) provides advice, consultation, guidance and assistance to Area Directors, management officials, employees and other customers on civil service HR issues, programs and policies; (4) provides leadership and direction to the HR staff throughout the Region; (5) assures compliance with Indian Preference statutory and policy requirements in HR practices; (6) provides HR services throughout the Region, to include, but not limited to, strategic human capital and workforce planning, succession planning, E-government HR initiatives and strategic planning, HR program evaluation and oversight; strategic consultation, management advisory services, HR leadership, classification and pay administration, staffing and placement, personnel
and payroll action processing, labor-management and employee relations, benefits administration and performance management; (7) provides advice, consultation, and assistance to management and when requested to Tribal officials on Tribal health program HR issues; (8) plans, administers and evaluates HR programs; (9) plans and implements HR responsibilities for IHS programs covered by the Region’s appointing authority; and (10) represents the Region in matters involving HR program responsibilities.

Division of Recruitment and Outreach (DRO) (Gxxxx)

(1) Develops and implements goals, objectives, and priorities to support IHS programs to recruit and retain health care professionals and coordinates these activities with the respective disciplines and/or national council; (2) assesses professional staffing needs and coordinates the development of recruitment and retention strategies through national marketing, social media, and professional sourcing outlets; (3) provides research and analysis functions related to recruitment and retention of health professionals; (4) generates and tracks applicant leads through various marketing sources in collaboration with IHS Regional offices, Areas, and recruiters; (5) assesses recruitment strategies and provides workforce planning data and reports on key metrics for data driven decision making and cost savings; (6) conducts workforce data analyses, including trends and projections, identifying workforce needs by personnel systems, categories, and disciplines; (7) conducts national/global recruitments for health professional positions; (8) provides advice, consultation, and guidance regarding national recruitments and outreach strategies; (9) manages, advises, develops, and administers student Pathways program recruitments IHS-wide; and (10) develops the IHS program to recruit and retain health care professionals, in accordance with policies and guidance provided by the DWRP.

Office of Finance and Budget (OFB) (Gxxxx)

(1) Develops and prepares the budget submission for for all IHS appropriations/accounts to HHS, OMB and the Congress (Presidents Budget); (2) participates with HHS officials in budget briefings for the OMB and the Congress; (3) distributes, coordinates, and monitors resource allocations; (4) develops and implements budget, fiscal, and accounting procedures and conducts reviews and analyses to ensure compliance in budget activities in collaboration with Headquarters officials and the Tribes; (5) provides cost advisory and audit resolution services in accordance with applicable statutes and regulations; (6) supports the Agency’s Medicare Cost Report efforts by providing necessary financial data to the contractor preparing the cost reports; and (7) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations, and resolution of audit findings as may be needed and appropriate.

Division of Audit (DA) (Gxxxx)

(1) Develops and recommends policies and procedures for Chief Financial Officer (CFO) audits; (2) develops and recommends policies and procedures for Tribes and Tribal organizations audit resolution within IHS; (3) provides advice, technical consultation, and training to IHS Headquarters, Area Offices, Tribal, and Urban Indian Health organizations for Title I, Title V, and Agency CFO audits; (4) provides audit resolution services in accordance with applicable statutes and regulations; (5) advises the Director, OFB, of proposed legislation, regulations, directives, and timelines that will affect audits within IHS, as well as how current legislation affects
handling of audit-related issues; (6) manages the IHS Division of Audit Resolution Management Information System (DARMIS) and the OIG Stewardship Reports and conducts analysis of data for reports and/or responses to internal and external inquiries; (7) serves as the IHS contact point to the HHS for the DARMIS, OIG Stewardship Reports, and the HHS Agency Financial Report; (8) coordinates the collection of disallowed costs cited in Tribes’ and Tribal organizations audits; (9) coordinates the correction of all findings coded by the HHS in Tribes’ and Tribal organizations’ audits; (10) coordinates receipt of audits from all organizations funded by IHS; (11) coordinates corrective action plans for CFO audit deficiencies and provides status updates to the IHS Headquarters’ senior managers and to the HHS; (12) coordinates resolution of deficiencies with IHS Headquarters’ senior managers and Area Directors; (13) administers the Agency’s internal control program in compliance with the Federal Managers’ Financial Integrity Act, OMB Circular No. A-123, and other applicable requirements; and (14) coordinates and performs Contract Support Costs litigation claim analyses.

Division of Budget Formulation (DBF) (Gxxxx)

(1) Interprets policies, guidelines, manual issuances, OMB circulars, and instructions from Congress, OMB, HHS, and IHS on formulation of preliminary, Departmental, and Congressional budget requests for all IHS appropriations/accounts; (2) directs the collection, review, and analysis of program and financial data from Headquarters, Area Offices, Tribes, Tribal and Urban Indian Health organizations used in determining resource requirements; (3) coordinates the Agency’s Tribal budget consultation process; (4) coordinates the preparation of the IHS preliminary, Departmental and Congressional budget justifications for all IHS appropriations/accounts; (5) prepares witness information for hearings before the House and Senate Appropriations Committees, House Resource Committee on Interior and Insular Affairs, the Senate Committee on Indian Affairs, and other Congressional committees as requested; (6) coordinates development of responses and inserts to be used for the record by and for Congressional appropriations hearings; (7) coordinates development of briefing materials in response to Congressional concerns and hearings; and (8) develops, implements, and maintains IHS policies and procedures for Congressional budget liaison activities.

Division of Budget Execution (DBE) (Gxxxx)

(1) Interprets policies, guidelines, and directives from Congress, OMB, Government Accounting Office (GAO), Treasury, and the HHS on Tribal shares and execution; (2) recommends and coordinates IHS-wide Area Budget Execution; (3) prepares apportionment requests for all IHS appropriations/accounts; (4) consults with Headquarters officials on and issues Area funding allocations; (5) monitors fund control at the appropriation level; (6) reviews IHS Headquarters memorandum of agreements for proper accounting; (7) provides fund certifications; (8) prepares reprogramming requests; (9) advises the Director, OFB on Agency compliance with self-determination policies, administrative procedures, and guidelines; (10) coordinates activities for resolution of budget execution issues with appropriate IHS Headquarters and Area staff; (11) analyzes various operating costs and provides Program Support Center (PSC) with Area breakouts; (12) manages and processes Intra-Governmental Payment and Collection transactions; and (13) prepares and responds to Budget Data Requests from HHS and OMB.

Division of Financial Systems (DFS) (Gxxxxx)
(1) Provides detailed data and analysis required to support IHS cost accounting activities; (2) coordinates with the Federal Enterprise Systems Management (FESM) within the HHS Office of Finance and to support the Unified Financial Management System (UFMS) change and release management process; (3) designs and develops training materials for the UFMS, HHS Consolidated Acquisition Solution (HCAS), and Financial Business Intelligence System (FBIS), and schedules and executes training for relevant users; (4) provides technical support to analyze reconciliation programs, reports, and extracts, and collaborate and develop solutions to ensure accurate information is available for Agency reconciliation activities; (5) provides direct support, expertise, and coordination to ensure successful implementation of new software, upgrades to existing software, and technical and functional application changes within UFMS, HCAS, FBIS, and interfacing applications; (6) supports end users of UFMS, HCAS, and FBIS to resolve technical and functional issues encountered through use of the applications; and (7) plans, directs, and coordinates the month-end and year-end closing and opening of UFMS.

Division of Financial Operations (DFO) (Gxxxx)

(1) Manages the IHS travel program, provides training, interprets travel regulations, conducts reviews and updates travel policy and procedures; (2) processes Headquarters travel orders and vouchers, including permanent change of station; (3) reviews and manages Agency-wide requests for travel allowances that require special approvals, such as international travel; (4) coordinates the conference management functions related to travel for the Agency; (5) provides support and technical assistance to Headquarters operational components in the development and maintenance of Headquarters operations budgets; (6) recommends Headquarters funding allocations; (7) performs fund certification for Headquarters; (8) monitors the status of Headquarters funds and assists with reconciliations and resolution of discrepancies; and (9) reviews and processes Headquarters vendor payments.

Division of Financial Policy and Reporting (DFRP) (Gxxxx)

(1) Reviews, interprets, and comments on policies, guidelines, and manual issuances of Congress, Treasury, the Government Accountability Office (GAO), the HHS, and the IHS on systems of fiscal management, including the Unified Financial Management System (UFMS); (2) develops Agency-wide policies, procedures, and standards for financial management areas such as cash management, debt management, and payment and disbursement activities and functions; (3) prepares quarterly and annual financial statements, monitors budgetary and proprietary accounts, and performs reconciliations to meet statutory and regulatory requirements; (4) assures the adequacy of IHS internal controls related to financial management; (5) specializes in the analysis and reporting of accounting data, preparation and distribution of financial reports, audited financial statements, financial statement notes, and supplemental information.

Division of Third Party Reimbursements (DTPR) (Gxxxx)

(1) Serves as the primary focal point for Agency-wide business office program operations and policy issues; (2) provides consultation to Headquarters and Area Offices and is liaison to Tribal organizations, HHS and Office of Management and Budget (OMB) regarding business office issues; (3) reviews and implements strategies to improve the efficiency of access to resources.
and provides support for local capacity building through technical assistance, training, consultation and information systems support; (4) develops, disseminates, and maintains business office policy and procedures manuals; (5) provides national leadership for Medicare, Medicaid, and private insurance reimbursement policy and procedures; (6) serves as the primary liaison with the Center for Medicare & Medicaid Services for rate setting; (7) serves as the focal point regarding the impact of existing and proposed laws, regulations and policies of Medicare and Medicaid managed care activities, including the review, evaluation, and monitoring of Sections 1115 and 1915(b) Medicaid waiver proposals and other State and Federal health care reform activities; (8) provides programmatic management, review and analysis of information systems for patient registration and billing and collections systems; (9) assures training on operations, various regulatory issues and negotiated managed care provider agreements; and (10) develops third-party budget materials and responds to Tribal, Congressional and HHS inquiries relating to third-party issues.

Office of Grants and Acquisitions (OGA) (Gxxx)

(1) Develops, recommends, and oversees the implementation of policies, procedures and delegations of authority for the acquisitions and grants management activities in the IHS, consistent with applicable regulations, directives, and guidance from higher echelons in the HHS and Federal oversight agencies; (2) fulfills the Agency Head of Contracting Activity responsibilities; (3) fulfills the Agency Grants Management Officer responsibilities; (4) manages the acquisitions and grants training programs; (5) manages the acquisitions and grants systems; and (6) coordinates the processing of Inter- and Intra-agency Agreements as well as Memoranda of Understanding.

Division of Acquisitions Management (Gxxxxx)

(1) develops, recommends, and oversees the implementation of policies, procedures and delegations of authority for the acquisitions management activities in the IHS, consistent with applicable regulations, directives, and guidance from higher echelons in the HHS and Federal oversight agencies; (2) advises the Chief Operating Officer and other senior staff of proposed legislation, regulations, and directives that affect contracting in the IHS; (3) provides leadership for compliance reviews of all IHS acquisition operations; (4) oversees completion of necessary corrective actions; (5) manages for the Agency, the HHS acquisition training and certification program; (6) supports and maintains the IHS Contract Information System and controls entry of data into the HHS Contract Information System; (7) serves as the IHS contact point for contract protests and the HHS contact for contract-related issues; (8) reviews and makes recommendations for approval/disapproval of contract-related documents such as: pre- and post-award documents, unauthorized commitments, procurement planning documents, Justification for Other Than Full and Open Competition waivers, deviations, and determinations and findings that require action by the Agency Head of the Contracting Activity, or the Office of the Secretary; (9) processes unsolicited proposals for the IHS; (10) coordinates the IHS Small Business programs; (11) oversees compliance with the Buy Indian Act; and (12) manages the processing of Inter- and Intra-agency agreements as well as Memoranda of Understanding.

Division of Grants Management (Gxxxxx)
(1) Directs grants management and operations for the IHS; (2) awards and administers grants and cooperative agreements for IHS financial assistance programs; (3) provides assistance for the resolution of audit findings for grant programs; (4) manages for the Agency, the HHS grants training and certification program; (5) continuously assesses grants operations; (6) oversees completion of necessary corrective action plans; (7) reviews and makes recommendations for improvements in grantee and potential grantee management systems; (8) serves as the IHS liaison with the HHS and the public for grants and other financial assistance programs within the IHS; (9) maintains the Catalog of Federal Domestic Assistance for IHS financial assistance programs; (10) conducts grants-related training for IHS staff, grantees, and potential grantees; (11) coordinates payment to grantees, including scholarship recipients; and (12) establishes and maintains the IHS automated Grants Information System and controls data entry into the HHS automated Grants Information System.

Office of Information Technology (OIT) (Gxxx)

(1) Provides Chief Information Officer (CIO) services and advises the Director, Indian Health Service (IHS), on all aspects of information resource management and health information technology (HIT) in compliance with related Federal laws, regulations, and policies; (2) directs the development, implementation, and maintenance of policies, procedures, standards, and architecture for information resource management, technology activities, and services in the IHS; (3) directs strategic planning and budgeting processes for information resources and technology; (4) leads IHS efforts in developing and implementing information resource and HIT management initiatives in IHS; (5) provides executive leadership and direction for health informatics throughout IHS; (6) directs the design, development, acquisition, implementation, operations, maintenance, and support of robust information systems and services used in the IHS; (7) directs the activities of the IHS Information Technology Investment Review Board (ITIRB) in assessing, implementing, and reviewing the Agency’s information systems; (8) contracts for information resource and technology-related software, equipment, and support services in collaboration with appropriate acquisition authorities; (9) provides project management support for information resource and technology initiatives; (10) directs the development, implementation, and management of the IHS IT Security program to protect the information resources of the IHS; (11) provides IT services and support to IHS, Tribal, and Urban Indian Health Programs (UIHP), including the Resource and Patient Management System (RPMS), Electronic Health Record (EHR), and the National Patient Information Reporting System (NPIRS); (12) oversees the IHS Section 508 program; (13) represents the IHS through development and procurement management of IT/HIT agreements with Federal, Tribal, Urban, State and other organizations; and (14) develops, implements, and maintains policies for Health Information Management (HIM) and provides HIM program direction across the IHS; (15) provides liaison services with and develops strategies for presenting the IHS IT budget and services to the IHS, Tribal, and UIHP; (16) advises the Office of Human Resources and Area IT programs on IT workforce issues, recruitment and training, (17) oversees the development and maintenance of the IHS enterprise architecture; and (18) participates in cross-cutting issues and processes including, but not limited to, emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations, and resolution of audit findings as may be needed and appropriate.

Division of Health Information Technology (DIT) (Gxxx)
(1) Provides Chief Technology Officer IT services and advises the CIO on all aspects of HIT; (2) develops clinical and business practice healthcare applications such as the RPMS and the EHR; (3) develops, implements, and supports health data interoperability applications and services; (4) develops, implements, and supports patient engagement and patient access applications and services; (5) develops healthcare statistical and quality reporting applications for NPIRS; (6) obtains system and business requirements from stakeholders for system design; (7) focuses on improving the HIT systems user experience to improve the usability and adoption of HIT; (8) provides quality assurance and risk management for software development; (9) supports enterprise wide implementations and enterprise wide support of HIT systems including deployment, configuration, and administration of IHS EHR systems; (10) ensures IHS IT infrastructure resource consolidation and standardization efforts support IHS healthcare delivery and program administration; (11) participates in cross-cutting issues and processes that involve HIT; (12) supports IHS program offices in ensuring compliance with Federal certification and accreditation requirements for HIT; and (13) represents the IHS to Federal, Tribal, Urban, State, and other organizations.

Division of Healthcare Information and Informatics (DHI) (Gxxxx)

(1) Provides Chief Health Informatics services and advises the CIO on all aspects of health informatics; (2) shapes the future of IHS clinical information systems through deliberate application of health informatics and HIT to deliver solutions that transform health care delivery; (3) provides leadership, direction, facilitation, and coordination for clinical informatics activities throughout IHS and coordinates Clinical Application Coordinator (CAC) activities across the enterprise; (4) facilitates and coordinates inter-agency agreements, federated trust agreements, contracts, and third-party clinical informatics services (i.e., ePrescribing, health information exchange, release of information, etc.) in support of the Agency’s health informatics and HIT requirements; (5) provides leadership, strategic direction, and support for the IHS’ efforts at modernization HIT; (6) supports the programmatic requirements for clinical information systems, with emphasis on the development and deployment of HIT solutions; (7) ensures alignment of Agency health informatics requirements and policies with Federal privacy and security laws, regulations, and policies; (8) provides education and mentoring to Federal, Tribal, and Urban stakeholders to accelerate the use of data for clinical operations, performance improvement, and decision making; (9) supports Agency quality initiatives, including developing measures to track clinical and other outcomes aligned to evidence-based practice; (10) leads IHS efforts to improve the adoption and meaningful use of HIT; (11) provides subject matter expertise and oversight of International Classification of Diseases (ICD) Coding System and other medical nomenclature implementation; and (12) represents the IHS to Federal, Tribal, Urban, State, and other organizations.

Division of Project Management and Budget (DPMB) (Gxxxx)

(1) Advises the CIO on all business aspects of information resources and project management; (2) develops and maintains the IHS enterprise architecture; (3) develops the IHS IT budget and related documents; (4) provides budget analyses and reports to the CIO; (5) provides technical analyses, guidance, and support for IHS capital planning and investment control activities; (6) manages the IHS portfolio management tool; (7) manages the activities of the IHS ITIRB in
assessing, implementing and reviewing the Agency’s information systems; (8) identifies alternatives among internal and external sources and recommends the best sources to supply information resource and technology products and services to IHS; (9) develops information resource and technology project governance structures, policies, and procedures to support effective project management; (10) provides project management and related support for IHS developed and acquired information resources and technology products and services; (11) provides centralized IT acquisition guidance for all IT/HIT procurement actions; (12) provides contract management support for IT initiatives; (13) provides contract liaison services to appropriate acquisition authorities; (14) provides enterprise software licensing support for IHS; (15) serves as IHS’ Section 508 program for compliance assurance, policy-setting on accessibility requirements, and the use of accessibility tools; (16) participates in cross-cutting issues and processes that involve IT; (17) responsible for the procurement management of IT/HIT agreements; and (18) represents the IHS to Federal, Tribal, State, and other organizations.

Division of Information Technology Operations (DITO) (Gxxxxx)

(1) Advises the IHS CIO on all matters related to IHS IT infrastructure support services including data center services, network operations, telecommunications services, messaging services, web services, and the IT national service desk (including HQ user support) services; (2) provides data center support services by hosting HIT, enterprise and administrative applications utilized by health care facilities throughout the IHS; (3) provides network operations support services that provides for network connectivity for Federal, Tribal, and Urban healthcare facilities; (4) provides enterprise-wide messaging services; (5) provides web services by developing and sustaining the IHS internet web presence including web based applications used for engagement and interaction; (6) provides enterprise wide service desk services by providing 24 x 7 IT-related support services; (7) participate in cross-cutting technology improvements and process that involve information resources and enterprise technology project management services; and (8) represents the IHS to Federal, Tribal, State, and other organizations.

Division of Information Security (DIS) (Gxxxxx)

(1) Provides the Chief Information Security Officer (CISO) cybersecurity services and advises the CIO on all aspects of IT and HIT information security; (2) provides agency-wide leadership in maintaining and improving the availability, confidentiality and integrity of data maintained in the Agency’s information systems; (3) develops and maintains enterprise-wide information governance, policies, procedures, and guidelines to safeguard information and IT systems; (4) develops and oversees a risk management framework process for the Agency; (5) maintains and serves as the Agency’s official repository for Plans of Action and Milestones (POA&M) to address weaknesses disclosed by Federal Information Security Management Act (FISMA) reviews, audits, security authorizations and Federal Managers Financial Management Integrity Act (FMFIA) annual certifications related to IT security matters; (6) provides system security engineering support to system owners and developers, and maintains cybersecurity process coordination within the Agency’s System Development Life Cycle (SDLC); (7) assembles and validates security authorization packages and makes recommendations to the CIO and the IHS Authorizing Official; (8) coordinates activities with internal and external organizations reviewing IT information resources for fraud, waste, and abuse; (9) defines cybersecurity
curricula and provides specialized security training for the Agency’s technical staff and general security awareness/orientation training required of all Agency employees; (10) manages and coordinates agency-wide IT security incident identification, reporting and response activities, and serves as the cybersecurity liaison with the Office of General Counsel, US Computer Emergency Response Team (US-CERT), the Federal Bureau of Investigation, Office of Inspector General and other external law enforcement agencies concerning IT security incident reporting and follow-up activities; (11) develops and oversees an enterprise-wide disaster recovery and contingency planning framework for IT systems; (12) monitors acquisition and budget execution for operational cybersecurity programs and projects to ensure fiscally responsible usage of funds; (13) participates in cross-cutting issues and processes that involve IT; and (14) represents the IHS to Federal, Tribal, Urban, State, and other organizations.

Office of Administrative Services (OAS) (Gxxxx)

(1) Administers physical security, facility management, space management services, parking management, including the employee transit subsidy program, the IHS mail and commercial printing programs, and HSPD-12 badge issuance for Headquarters; (2) coordinates with OIT to provide telecommunication services to Headquarters; (3) serves as liaison with the HHS and the GSA on logistics issues affecting the IHS; (4) provides guidance and oversight to the IHS on the control and safeguard of classified national security information; (5) plans, develops and administers the IHS-wide Homeland Security Presidential Directive 12 (HSPD-12) program to include providing leadership on the Physical Access Control Systems, and the Physical Security Program; (6) provides special transportation and security; (7) provides leadership and guidance for the IHS Forms Management Program; (8) provides leadership and coordination in the planning, development, operation, oversight, and evaluation of special office support projects for office relocations, and inter-and intra-agency activities; (9) plans, develops, and administers the IHS policies on supply management in conformance with Federal supply management laws, regulations, policies, procedures, practices, and standards; (10) interprets regulations, policies, procedures, practices and standards, and provides advice on execution and coordination of supply management policies and programs; (11) administers management systems and methods for planning, utilizing, and reporting on administrative supply management programs, including the IHS supply accountability and controls systems; (16) conducts surveys and studies involving evaluation and analysis of the supply management activities IHS-wide; (17) maintains liaison with the HHS and the GSA on supply management issues and programs affecting the IHS; (18) plans, develops, and administers the IHS personal property management program in conformance with Federal personal property management laws, regulations, policies, procedures, practices, and standards; (21) interprets regulations and provides advice on execution and coordination of personal property management policies and programs; (22) administers management systems and methods for planning, utilizing, and reporting on personal property programs, including the precious metals recovery program and IHS personal property accountability and control systems; (23) provides guidance and serves as principal administrative authority on Federal personal property management laws, regulations, policies, procedures, practices, and standards, in conjunction with the OGC; (24) conducts surveys and studies involving evaluation and analysis of the personal property management activities IHS-wide; (25) maintains liaison with the HHS and the General Services Administration (GSA) on personal property management issues and programs affecting the IHS; (26) plans, develops and administers the IHS Fleet Management Program; (27) prepares reports on IHS personal property activities; and (28) administers
the local Headquarters personal property management program to include receiving, tagging, storage and disposal in addition to conducting the annual inventory for all HQ locations.

*Office of Enterprise Risk Management and Internal Controls (OERMIC) (Gxx)*

(1) Coordinates with key Headquarters Offices to ensure cross cutting agency strategic planning, enterprise risk management (ERM), and management of internal control across IHS; (2) ensures IHS’ portfolio of enterprise risks are appropriately and effectively managed by identifying accountable individual risk owners; (3) provides the Agency Chief Risk Officer to advise on risk management and provide expertise, advice, and assistance to the Director, IHS, Office Directors, Area Directors and other key staff at both Headquarters and Area levels on ERM matters; (4) develops goals and objectives for the ERM program, integrates them with broader IHS-wide strategic goals/objectives, and tracks progress toward achieving them; (5) evaluates and monitors systems of internal control across IHS and uses the assessments of the internal control program as an integral part of ERM to effectively manage risks across IHS.

*Associate Director Quality (ADQ) (Gxx)*

The Associate Director Quality (ADQ): (1) provides operational and management information and expertise necessary for the formulation of quality policies, goals and objectives, and operational strategies, and in program and resource allocation decisions which impact the quality approach for the organization. (2) Works to identify issues, deficiencies, and requirements to be used as a basis for planning new programs, the expansion, contraction, or elimination of ongoing programs, and for determining program effectiveness through evaluation, which includes the utilization of data analytics and reporting. (3) Proactively evaluates current state, existing compliance, quality, risk, reliability, and safety information in an actionable value-driven manner to better facilitate sound decision making, to better focus priorities, and to develop forward-looking policies. (4) Advises the IHS Director on strategies that will position the IHS as a leader in the provisioning of safe and high quality care delivery in the backdrop of reform and the context of the healthcare community. (5) Leverages best industry practices to accelerate needed organizational change. (6) Acts on behalf of the IHS Director on expert panels, and in negotiations to reconcile conflicting policies and assures utilization of all possible resources, including those gained through collaborative efforts with other HHS Operating Divisions. (7) Interacts with or represents HHS Agency and Department officials as well as high level representatives of other Federal Agencies, including the National Indian Health Board, the Office of Management and Budget (OMB), the Congress, States, Tribal and inter-Tribal Governments, and other individuals and groups active and influential in shaping opinions, policies and actions in Indian health. (8) Manages mission, organization programs and compliance requirements of health care delivery systems, and directs health care programs at a national level. (9) Oversees, directs, and guides healthcare management areas to influence and provide input on healthcare policy and plans, workforce management, strategic planning, risk management and budget for the IHS health care delivery system. (10) Advises the IHS Director on intersecting clinical and business processes, medical quality assurance, quality improvement methods, and application of improvement science. (11) Derives evidence-based decisions that lead to quality results by applying critical thinking, performance measurement system and communication methods, calculating risks, and understanding customer expectations and demands. (12) Integrates information sources for organizational performance improvement through data analysis.
from quantitative and qualitative sources and research studies, display and interpretation of data dashboards, and Health Information Technology and Health Information Exchange resources, including data networks, database management, and operating systems and interfaces.

Office of Quality Health Care (OQHC) (Gxxx)

(1) Implements and routinely updates the IHS Quality Framework, integrating feedback and inputs from various levels of the organization and Tribal/Urban Indian Health Programs partners; (2) oversees accreditation readiness activities and compliance with accreditation requirements for all IHS Direct Service facilities, to include periodic mock surveys and formal accreditation surveys; (3) conducts training and informational activities that promote skills development in quality improvement, quality assurance, and performance improvement; (4) routinely assesses and reports on patient satisfaction and experience using standardized survey instruments and processes, and facilitates improvement activities based on survey results; (5) coordinates and organizes participation of IHS facilities and staff in interagency quality improvement activities; (6) monitors quality improvement and assurance metrics for healthcare delivery processes and outcomes, and advises other IHS Offices on quality improvement methods to improve support and outcomes of IHS administrative functions and processes; (7) assess, address, and continuously improve systems and processes to reduce and improve patient wait times in all related healthcare settings; (8) consult on and provide guidance for standardization of healthcare delivery policies and protocols; (9) oversee patient safety management and reporting systems and processes, sentinel event investigations/root cause analyses, and clinical risk management; (10) oversee and manage credentialing of licensed independent practitioners via standardized methods and a uniform system; and (11) institutionalize patient-centered care processes, engagement of patients as partners in care, and patient activation through self-management support and involvement in delivery service improvements.

Division of National Credentialing (DNC) (Gxxxx)

(1) Manages credentialing standards and policy; (2) acquires and maintains centralized credentialing software system; (3) ensures unification of credentialing officers/prime source verification officers; (4) ensures standardized training and support resources for credentialing officers.

Division of Facility Standards and Compliance (DFSC) (Gxxxx)

(1) Manages and coordinates mock surveys; (2) ensures accreditation services coordination; (3) provides accreditation resource management; (4) provides survey corrective action plan development assistance and coordination; (5) manages accreditation and certification survey reports; (6) ensures multidisciplinary integration of survey readiness support activities; (7) ensures unification of Area Quality Managers and Service Unit QAPI Officers.

Division of Healthcare Facility Management (DHFM) (Gxxxx)

(1) Coordinates training and support resources for healthcare facility management staff; (2) standardizes position descriptions and competencies for management staff; (3) standardizes management tools and resources; (4) provides Just Culture model education, training and application; (5) provides leadership development and skill-building; (6) facilitates change management to support quality assurance and quality improvement.
Division of Clinical Risk Management (DCRM) (Gxxxx)

(1) Employs strategies that reduce the possibility of a specific loss; (2) systematically gathers and utilizes data; (3) implements proactive and reactive components to prevent losses and mitigates impact of losses; (4) implements strategies to reduce the risk of harm to patients, liability exposure of healthcare providers, and financial loss to the IHS; (5) performs incident identification and reporting; (6) identifies and addresses potential tort claims, sequestering medical records, and investigation of medical adverse events; (7) reviews patient grievances concerning quality of care; (8) performs sentinel event/root cause analysis review and documentation; (9) analyzes methods for dismissal of patients from care; (10) reviews outside requests for medical records; (11) responds to inquiries from governmental agencies, media, and advocacy groups; (12) ensures compliance with regulatory, accreditation, and contractual agreements; (13) examining issue related to determination of “standards of care”; (14) represents IHS when claims are presented for review by the Malpractice Claims Review Panel chartered by the Department of Health and Human Services; (15) maintains case files and a malpractice claims database; (16) provides case summaries, peer review, outcome information, and feedback of risk management recommendations; (17) disseminates information about the review process; (18) responds to outside organizations requesting tort claim-involvement histories on former employees; (19) assists providers with Malpractice Claims Review Panel; (20) submits payment reports to the National Practitioner Data Bank.

Division of Quality Improvement (DQI) (Gxxxx)

(1) Trains healthcare staff and support team members in the Model for Improvement to rapidly test small scale changes at the local level for improvement in clinical processes to improve patient outcomes, experience of care, and resource utilization; (2) leads change management for practice transformation to embrace new models of care delivery and to enhance efficiency of the care delivery process; (3) improves patient and staff satisfaction with healthcare service delivery; (4) establishes and monitors metrics to evaluate improvement efforts and outcomes and ensures all staff members understand the metrics for success; (5) builds capability in all staff to support improvement and ensure that patients, families, providers and care team members are involved in quality improvement activities; (6) optimizes use of health information technology and data to continuously improve performance, quality and service (Resource and Patient Management System and iCare); (7) implements and enhances patient empanelment to facilitate care management and population health; (8) develops continuous and team-based healing relationships in which roles are well defined and tasks are distributed among multidisciplinary care team members to reflect the skills, abilities and credentials of the individual team members; (9) fosters patient-centered interactions through expanded patient roles in decision making, health-related behaviors and self-management; (10) reduces barriers to accessing care through more efficient service delivery processes, alternative care delivery methods, expanded access to the care team, and appointment scheduling flexibility; (11) boosts care coordination through community resource linkages, integrating specialty care referral and coordination processes, assisting with referral-related processes, and assuring completion of all elements of care; (12) reduces all types of hospital acquired conditions through technological innovation, attention to detail, and implementation of high reliability science; (13) reduces
avoidable hospital readmissions through enhanced transition-of-care planning and coordination, communication with primary care, and management of community-based resource delivery.

Chief Medical Officer (CMO) (Gxx)

The Chief Medical Officer (CMO) (1) serves as the primary source of national advocacy, policy development, budget development and allocation for clinical, preventive, and public health programs for the IHS, Area Offices, and Service Units; (2) provides leadership in articulating the clinical, preventive, and public health needs of AI/AN, including consultation and technical support to clinical and public health programs; (3) develops, manages, and administers program functions that include, but are not limited to, alcohol and substance abuse, behavioral health, chronic diseases such as diabetes, asthma, dental services, medical services, Health Promotion/Disease Prevention, domestic violence, pharmacy and pharmaceutical acquisition, community health representatives, emergency medical services, health records, disabilities, Human Immunodeficiency Virus/ Acquired Immune Deficiency Syndrome, maternal health, child health, clinical nursing, public health nursing, women’s health, nutrition and dietetics, and elder care; (4) investigates service delivery and community prevention evidence-based and best practice models for dissemination to community service locations; (5) expands the availability of resources available for AI/AN health by working with public and private entities as well as Federal agencies within and outside the HHS; (6) coordinates development of staffing requirements for new or replacement health care facilities and approves Congressional budget requests for staffing, in collaboration with the Office of Environmental Health and Engineering; (7) provides program oversight and direction for the facilities planning and construction process; (8) develops and coordinates various Health Initiative and Nursing grant programs; (9) provides the national focus for recruitment and retention of health professionals and coordinates with the scholarship and loan repayment programs; (10) works with the Contract Health Services (CHS) program on CHS denial appeals to the IHS Director and in determining CHS medical priorities; (11) manages the clinical (medical, nursing, pharmacy, dental) features of medical tort claims against the IHS; (12) works with the Office of Management Services in managing the clinical aspects of the IHS workman’s compensation claims; (13) oversees IHS efforts in a variety of quality assurance and improvement activities, including patient safety; (14) monitors approximately one-half of the IHS’s Government Performance and Results Act (GPRA) indicators, overseeing indicator development, data collection, and reporting results; and (15) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-determination issues, border health initiatives, Tribal delegation meetings, Tribal shares computations and resolution of audit findings as may be needed and appropriate.

Office of Purchased and Referred Care (OPRC) (Gxxx)

(1) Plans, develops, and coordinates the PRC program and required business practices; (2) develops, disseminates, and maintains PRC policy and procedures manuals; (3) establishes eligibility criteria for Federal PRC benefits and determining PRC eligibility under such criteria; (4) formulates and monitors the PRC budget and distribution methodologies; (5) administers the Catastrophic Health Emergency Fund; (6) administers the PRC Quality Assurance Fund; (7) administers the PRC claims adjudication activity for the IHS Headquarters; (8) monitors the implementation of the IHS payment policy and reports the status to the Chief Medical Officer; (9) administers the IHS Fiscal Intermediary contract; (10) conducts data analysis and national utilization review and utilization management of PRC services rendered by private
sector providers; and (11) provides consultation to Headquarters and Area Offices, and responds to inquiries from the Congress, Tribes, and other Federal agencies.

**Office of Diabetes Treatment and Prevention (ODTP) (Gxxxx)**

(1) Plans, manages, coordinates, and evaluates a comprehensive clinical and community program focusing on type 2 diabetes in AI/AN communities; (2) plans, manages, develops, coordinates, and evaluates the Congressionally-mandated Special Diabetes Program for Indians, a large grant program focused on the prevention and treatment of diabetes; (3) coordinates and monitors contracts and grants with IHS, Tribal, Urban Indian health programs and other entities; (4) develops objectives, priorities and methodologies for the conduct of clinical and community diabetes programs; (5) monitors, evaluates, and provides consultation to clinical and community diabetes grant programs and other new initiatives; (6) provides leadership, professional guidance, and staff development to Area Diabetes Consultants, Model Diabetes Programs and IHS, Tribal, Urban diabetes program providers; (7) coordinates diabetes training needs for Area Offices, Service Units, and Tribes; (8) develops and implements IHS standards of care, clinical guidelines, policies, and procedures for diabetes and diabetes-related conditions; (9) coordinates model diabetes program sites; (10) develops and disseminates diabetes-related information and materials to IHS, Tribes and Urban Indian health programs; (11) is responsible for preparing budgetary data, analysis and program evaluations for budget presentations and Congressional hearings; and (12) coordinates a chronic disease strategic plan initiative for the IHS.

**Office of Oral Health (OOH) (Gxxxx)**

(1) Plans, develops, coordinates, and evaluates dental health programs; (2) establishes staffing, procedural, facility, and dental contract standards; (3) coordinates professional recruitment, assignment, and staff development; (4) represents dental staff and Area Dental Programs in personnel matters, including the monitoring of personnel orders for both appointments and transfers, establishing promotion priority lists, processing special pay and retention bonus contracts, and serving as the HQ representative on adverse action cases; (5) improves effectiveness and efficiency of dental programs; (6) develops resource opportunities and monitors utilization of resources for dental health programs; (7) formulates, allocates and analyzes dental program budget and prepares information for program and budget presentations as well as Congressional inquiries; (8) advocates for oral health needs of the AI/AN population; (9) coordinates health promotion and disease prevention activities for the dental program; (10) monitors oral health status and treatment needs of the AI/AN population; (11) provides clinical and technical support to field staff by way of oral health surveys, provision of clinical trials, consultation on treatment cases, publication of quarterly newsletters and serving as liaison with public and private institutions, as well as major universities to evaluate new and existing strategies for addressing oral health problems in AI/AN; (12) serves as the IHS liaison for oral health issues with other Federal agencies; (13) serves as main source of information transfer to field staff via mediums including, but not limited to, teleconference hookups, electronics (email/listservs), conventional mail and meeting attendance; and (14) maintains and distributes information from the IHS centralized dental database, including workload, program resource directories and exploring the applicability of new health informatics technologies and systems.

**Office of Nursing Services (ONS) (Gxxxx)**
(1) Plans, develops, coordinates, evaluates, manages and advocates for Clinical and public health Nursing Services, including acute care, ambulatory care, and public health nursing services, Women’s Health, and Community Health Representative Programs (CHR); (2) identifies and establishes standards for these programs; (3) provides leadership, professional guidance, and staff development; (4) plans, develops, coordinates, manages, and evaluates nursing CHR education to better meet the needs of nursing and CHRs in Indian Health programs; (5) coordinates professional staff, including nursing recruitment, scholarship recipients, assignment and development to meet Area Office, Service Unit, and Tribal needs in accordance with IHS policies and procedures; (6) provides guidance in planning, developing, and maintaining management information systems that will benefit documentation and data collection by and for nurses and community health workers; and (7) prepares budgetary data, analysis and program evaluations and prepares information for program and budget presentations, as well as Congressional hearings.

Office of Behavioral Health (OBH) (Gxxxx)

(1) Applies identified profession and program standards, monitors and evaluates community and Area-wide services provided through grants or contracts with AI/AN Tribes, villages, organizations, and direct IHS operations for mental health, social services, and alcohol/substance abuse; (2) coordinates AI/AN community behavioral health programs including alcohol/substance abuse prevention and treatment, mental health, and social work with program directors, division staff, Area staff, and other agencies and institutions; (3) coordinates contracts and grants for behavioral health services and monitors services provided; (4) makes program and policy changes using data analysis, recommendations from operational levels, research results, and coordinates resource allocation from program policies; (5) provides behavioral health program consultation to AI/AN groups and IHS staff; (6) provides leadership in the identification of behavioral change interventions and supports implementation at the community level; (7) coordinates with Federal, State, professional, private, and community organizations on alternate health care resources; (8) works with other Federal agencies and departments to provide additional Federal resources for AI/AN behavioral health programs; (9) provides financial resources and programmatic oversight for complying with the Americans With Disabilities Act through programs such as the Indian Children’s Program, and for elders through partnerships with the Administration on Aging and the National Indian Council on Aging; (10) measures and evaluates the quality of behavioral health care services; (11) manages the Tele-Behavioral Health Program; and (11) prepares information on behavioral health for budgetary hearings and provides program evaluation results to the IHS Director, the Congress, and the Administration.

Office of Clinical and Community Programs (OCCP) (Gxxxx)

(1) Manages, develops, and coordinates a comprehensive clinical, preventive and public health approach to clinical and community program focusing on maternal and child health, Indian children services including preventive health support services for medicine, nutrition, HIV/ AIDS, pharmacy, health records, health education, health promotion, and disease prevention; (2) develops objectives, priorities, and methodologies for the conduct and evaluation of clinical, preventive, and public health for community health-based programs; (3) provides, develops, and implements IHS guidelines, standards, policies, and procedures on clinical, preventive, and public health for community based programs and initiatives; (4) monitors, evaluates, and provides consultation to clinical and community programs; (5) plans jointly with other programs and divisions of the IHS and other agencies on research and
coordination of services; (6) coordinates professional staff recruitment and training needs, and scholarship recipient assignments and development to meet Area Office, Service Unit, and Tribal health professional human resource needs; (7) coordinates and monitors contracts and grants with IHS programs and other entities, in collaboration with the Division of Acquisitions Policy and the Division of Grants Operations; (8) develops and disseminates information and materials to IHS facilities and to Tribes and Urban Indian health programs; (9) develops program budget materials for resource management, program data collection, administrative system integrity and accountability and responds to Congressional and Departmental inquiries; and (10) manages the Veterans Affairs Pharmaceutical Prime Vendor Contract and IHS National Core Formulary.

**Office of Telemedicine (OT) (Gxxx)**

(1)

**Associate Director Field Operations (ADFO) (Gxx)**

The Associate Director Field Operations (ADFO): (1) oversees and supervises the IHS Area Offices; (2) oversees and supervises the Headquarters Office of Environmental Health and Engineering; (3) advises the Director and other senior staff on key activities, concerns, and needs that arise in the Areas and OEHE; (3) provides leadership and serves as liaison to the Area Directors to address issues, coordinate responses, manage deployment of Area staff to assist national or local efforts, and monitor Area and service unit procurements and budgets; and (4) provides expert advice and recommendations from the field perspective for initiatives, program needs, process improvements, etc. as requested.

**Area Offices (AO) (Gxx)**

Each Area Office: (1) plans, develops, directs program support to ensure the provision of preventive, curative and rehabilitative health services; (2) manages the transfer of programs, services, functions, and activities and related funding to Tribes through Title I Self Determination contracts; (3) builds partnerships with the Tribes within its region; and (4) assures Area Office and service unit compliance with all applicable laws, regulations, policies, etc. in carrying out operational duties.

**Office of Environmental Health and Engineering (OEHE) (Gxx)**

(1) Advises and supports the IHS Director on policy, budget formulation, and resource allocation regarding environmental health and engineering activities of IHS and Tribal facilities programs; (2) provides Agency-wide leadership and consultation to IHS, Tribal, and Urban Indian health programs on IHS goals, objectives, policies, standards, and priorities; (3) represents the IHS within the HHS and external organizations for purposes of liaison, professional collaboration, cooperative ventures, and advocacy; (4) serves as the primary source of technical advice for the IHS Director, Headquarters, Area Offices, Tribal, and Urban Indian health programs on the full scope of health care facilities acquisition construction and operations, sanitation facilities acquisition construction and management, environmental health services, environmental engineering, clinical engineering, and realty services management; (5) develops and recommends policies, administrative procedures and guidelines for Public Law 93–638 construction activities; (6) develops objectives, priorities, standards, and methodologies to conduct and evaluate environmental health, environmental engineering, and facilities
engineering and management activities; (7) coordinates the formulation of the IHS Facilities appropriation budget request and responds to all inquiries about the budget request and programs funded by the IHS Facilities appropriation; (8) maintains needs-based and workload-based methodologies for equitable resource distribution for all funds appropriated under the IHS Facilities appropriation; (9) provides leadership, consultation, and staff development to assure functional, safe, and well-maintained health care facilities, a comprehensive environmental health program, and the availability of water, sewer, and solid waste facilities for Indian homes and communities; (10) coordinates the IHS OEHE responsibilities in responding to disasters and other emergency situations, in collaboration with the Office of Clinical and Preventive Services; (11) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations and resolution of audit findings as may be needed and appropriate; and (12) provides leadership, coordination and representation for the IHS Sustainability Program.

Division of Sanitation Facilities Construction (DSFC) (Gxxxx)

(1) Develops, implements, and manages the environmental engineering programs, including the Sanitation Facilities Construction (SFC) program, and compliance activities associated with environmental protection and historic preservation legislation; (2) provides Agency-wide management assistance and special support/consultation to address special environmental public health problems for environmental engineering/construction activities, and for compliance with environmental legislation; (3) works closely with other Federal agencies to resolve environmental issues and maximize benefits to Tribes by coordinating program efforts; (4) develops, implements, and evaluates Agency program activities, objectives, policies, plans, guidelines, and standardized data systems for SFC activities; (5) consults with Tribal groups/organizations in the development and implementation of SFC policies and initiatives, and in the identification of sanitation needs; (6) maintains a national inventory of current Tribal sanitation facilities needs, and past and present projects to address those needs; and (7) allocates financial resources Agency-wide based on need and workload using the national data inventories, in collaboration with the OFA.

Division of Facilities Operations (DFO) (Gxxxx)

(1) Develops, implements, and manages the programs affecting health care facilities operations, including the routine maintenance and improvement, real property asset management, realty, facilities environmental, staff quarters, and clinical engineering programs; (2) develops, implements, monitors and evaluates Agency program activities, objectives, policies, plans, guidelines, and standardized data systems for health care facilities operations; (3) serves as the principal resource for coordination of facilities operations and provides consultation to IHS and the Tribes on health care facilities operations; (4) maintains real property asset and quarters management systems; (5) maintains clinical engineering management systems; (6) maintains resources allocation methodologies for the Facilities appropriation Agency-wide based on supportable space and workload data; (7) maintains Agency-wide data on Federal and Tribal facilities for program budget justification; (8) develops and evaluates technical standards and guidelines for health care facilities operations; and (9) monitors the improvement, alternation, and repair of health care facilities.
Division of Facilities Planning and Construction (DFPC) (Gxxxx)

(1) Develops, implements, and manages the IHS Health Care Facilities Planning and Construction program, including the facilities planning process, facilities design process, facilities acquisition, and construction project management; (2) develops, implements, monitors, and evaluates Agency program activities, objectives, policies, plans, guidelines, and standardized data systems for health care facilities planning and construction; (3) develops and maintains construction priority systems, and with the Division of Engineering Services, develops project budget documents for the health care facilities construction program; (4) services as the principal resource in providing leadership, guidance, and coordination of health care facilities engineering activities for the IHS Headquarters, Area Offices, Tribal and Urban Indian health programs; (5) evaluates justifications for major improvement and alteration projects and other large scale construction activities; (6) develops and evaluates technical standards and guidelines for health care facilities construction.

Division of Environmental Health Services (DEHS) (Gxxxx)

(1) Develops, implements, and manages the IHS Environmental Health Services programs, including the Injury Prevention and Institutional Environmental Health programs to identify environmental hazards and risk factors in tribal communities and propose control measures to prevent adverse health effects; (2) serves as the primary source of technical and policy advice for IHS Headquarters and Area Offices on the full scope of environmental health issues and activities; (3) maintains relationships with other Federal agencies and Tribes to maximize responses to environmental health issues and maximize benefits to Tribes by coordinating program efforts; (4) provides leadership in identifying and articulating environmental health needs of AI/AN populations and support efforts to build Tribal capacity; (5) provides personnel support services and advocates for environmental health providers; (6) maintains, analyzes, make accessible, and publishes results from national databases; (7) manages resource allocation activities in accordance with established criteria based on workload; (8) develops and evaluates standards and guidelines for environmental health programs and activities; and (9) provide technical assistance and consultation to Federal and Tribal programs on a variety of program elements such as food safety, health housing, community facilities, community injury prevention, water quality, waste management, occupational safety in healthcare and non-healthcare institution, mass gatherings, vectorborne and communicable disease control, and emergency management.

Division of Engineering Services (DES) (Gxxxx)

(1) Administers the acquisition and project management of the design and construction of all IHS new construction health care facilities projects; (2) administers the acquisition of all IHS A/E services and construction contracts greater than $150,000, including maintenance and improvement, sanitation facilities construction, Medicare & Medicaid, Non-recurring Expense Fund, and other IHS-funded projects; 3) administers the Agency Lease Program, including the management of the Lease Priority System Committee, approval of all IHS space requests, and executing all Agency leases with GSA, and as authorized under P.L. 93-638 and P.L. 94-437, as amended; (4) serves as the source of engineering and contracting technical expertise for Agency programs/projects and other technical programmatic areas affecting the planning, design,
alteration, leasing, and construction of Agency health care and sanitation facilities for Indian homes and communities; (5) designated as the IHS Authority having Jurisdiction (AHJ) for all code interpretations required to resolve conflicts that arise from interpreting and applying various codes and other related criteria in all Agency facilities and design/construction projects.

Associate Director Intergovernmental Affairs (ADIA) (Gxx)

Office of Tribal Self-Governance (OTSG) (Gxxx)

Develops and oversees the implementation of Tribal self-governance legislation and authorities in the IHS, under Title V of the Indian Self-Determination and Education Assistance Act, Public Law 93–638, as amended; (2) develops and recommends policies, administrative procedures, and guidelines for IHS Tribal self-governance activities, with maximum input from IHS staff and workgroups, Tribes and Tribal organizations, and the Tribal Self-Governance Advisory Committee; (3) advises the IHS Director on Agency compliance with self-governance policies, administrative procedures and guidelines and coordinates activities for resolution of problems with appropriate IHS and HHS staff; (4) provides resource and technical assistance to Tribes and Tribal organizations for the implementation of the Tribal Self-Governance Program (TSGP); (5) participates in the reviewing of proposals from Tribes for self-governance planning and negotiation grants and recommends approvals to the IHS Director; (6) determines eligibility for Tribes and Tribal organizations desiring to participate in the TSGP; (7) oversees the negotiation of self-governance compacts and annual funding agreements with participating Tribal governments; (8) identifies the amount of Headquarters managed funds necessary to implement the annual funding agreements and prepares annual budgets for available Tribal shares in conjunction with IHS Area and Headquarters components; (9) coordinates annual reconciliation of funding agreements with IHS Headquarters components, Area Offices, and participating Tribes; (10) serves as the principal IHS office for developing, releasing, and presenting information on behalf of the IHS Director related to the IHS Tribal self-governance activities to Tribes, Tribal organizations, HHS officials, IHS officials, and officials from other Federal agencies, State and local governmental agencies, and other agencies and organizations; (11) arranges national self-governance meetings to promote the participation by all AI/AN Tribes in IHS self-governance activities and program direction; (12) participates in meetings for Self-Governance Tribal delegations visiting IHS Headquarters; and (13) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations and resolutions of audit findings as may be needed and appropriate.

Office of Direct Service and Contracting Tribes (ODSCT) (Gxxx)

(1) Assures that Indian Tribes and Tribal organizations are informed regarding pertinent health policy and program management issues; (2) assures that consultation and participation by Indian Tribes and organizations occurs during the development of IHS policy and decision making; (3) provides overall Agency leadership concerning functions and responsibilities associated with self-determination contracting (Title I of the Indian Self-Determination Act); (4) advises the IHS Director and senior management on activities and issues related to self-determination contracting; (5) monitors Agency compliance with self-determination policies, administrative procedures, and guidelines; (6) provides Agency leadership in planning and conducting a program of expert guidance, technical assistance, and
support to Indian Tribes that continue to receive their health services directly from the IHS; (7) administers a national grant program designed to assist Tribes and Tribal organizations in beginning and/or expanding self-determination activities; (8) provides Agency leadership in the development of policy; (9) discharges operational responsibilities, with respect to the contract support cost (CSC) program administered by the IHS; (10) provides advice to the IHS Director and senior management on Tribal issues and concerns by acting as liaison with Tribal leaders, national Tribal organizations, inter-Tribal consortia and Area health boards; (11) provides leadership in the management process of receiving visiting delegations of Tribal leaders and representatives to IHS Headquarters and provides staff assistance to the Office of the Director with respect to Tribal meetings at locations outside of Headquarters; (12) provides overall Agency leadership with respect to policy development and issues concerning the Federal recognition of new Tribes; (13) supports Tribes in managing health programs; (14) coordinates available support from other public and private agencies and organizations; (15) maintains a central database on relevant information to contact Tribal leaders, health programs, etc.; and (16) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-determination issues, Tribal shares computations and resolution of audit findings as may be needed and appropriate.

Office of Urban Indian Health (OUIHP) (Gxxx)

(1) Advises the IHS Director on the activities and issues related to the IHS’ implementation of Title V, “Indian Health Care Improvement Act”, as amended, for IHS-funded urban Indian organizations; (2) develops and recommends policies, administrative procedures, and guidelines for IHS services and activities for urban organizations; (3) assures that urban Indian organizations are informed of pertinent health policies; (4) ensures that conferring with urban Indian organizations occurs during the development of IHS policy to the extent allowed by law; (5) supports urban Indian organizations in managing health programs; (6) coordinates support available from other public and private agencies and organizations; (7) advises the IHS Director on Agency compliance with urban Indian organization policies, administrative procedures, and guidelines; (8) maintains relevant information on urban Indian organizations; (9) coordinates meetings and other communications with urban Indian organization representatives; and (10) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, onsite reviews and compliance issues, and resolution of audit findings as may be needed and appropriate.

Associate Director Analysis and Evaluation (ADAE) (Gxx)

The Associate Director Analysis and Evaluation (ADAE) is responsible for (1) providing IHS-wide leadership, guidance and support for public health program and activities including strategic planning, evaluation, Government Performance and Results Act (GPRA), research, epidemiology, and statistics; (2) providing Agency-wide leadership and consultation to IHS, Tribal, and Urban Indian health programs on IHS goals, objectives, policies, standards, and priorities; (3) advocates for the public health needs and concerns of Al/AN and promotes quality health care; (4) manages and provides national leadership and consultation for IHS on assessments of public health or medical services, research agendas, and public health initiatives for the Agency; (5) supports and advocates for Al/AN to access State and local public health programs to build public health capacity; and (6) participates in cross-cutting issues and processes including, but not limited to emergency preparedness/security, budget formulation, self-
determination issues, Tribal shares computations and resolution of audit findings as may be needed and appropriate.

Office of Epidemiology and Disease Prevention (DEDP) (Gxxx)

(1) Builds public health capacity in Tribal communities through a network of Tribal Epidemiology Centers; (2) serves IHS and Tribal communities through disease surveillance, health data management, analysis and reporting, and providing technical support for a broad range of public health activities; (3) establishes and maintains core public health surveillance and related data systems to support situational awareness of chronic and infectious disease occurrence of public health importance and aligned with Agency priorities; (4) generates diverse public health data to support assessment of public health system performance and improvement for national IHS programs; and (5) determines and responds to contemporary and established public health problems among AI/AN populations and coordinates and integrates response with other relevant public health partners (e.g., CDC, NIH, Tribal, state and local health departments).

Office of Program Statistics (OPS) (Gxxxx)

(1) Plans, develops, directs, and coordinates an analytical statistical reporting program to provide data for measuring the health status and unmet health needs of the AI/AN population; (2) develops and coordinates the collection, processing, and analysis of demographic, health, and related spatial data for the Agency; (3) maintains, analyzes, makes accessible, and disseminates data from national AI/AN health centered geographic and service delivery related collections of data and analyses; and (4) provides statistical decision support and business intelligence to internal and external partners.

Office of Planning and Evaluation (OPE) (Gxxxx)

(1) Develops and aligns Agency strategic planning with performance measurement and program evaluation activities; (2) provides guidance and support for IHS-wide program evaluation with a focus on improving systems of care; (3) provides support for facilities and staffing planning and serves as liaison to Area and Tribal Planning Officers; (4) conducts regular reviews of progress on Agency strategic goals; (5) makes available to the public resources for planning and evaluation; and (6) supports data-driven decision-making and evidence-driven health system improvement through coordination of the collection and analysis of program data.

Office of Research and Analysis (ORA) (Gxxxx)

(1) Supports national health research activities, including community-oriented practice-based research, human subject research protections, and research related to health problems and the delivery of care to AI/ANs; (2) provides assistance in designing and conducting analytical studies to address a wide range of operational and management challenges; (3) provides decision support and analytics functions to the agency in the areas related to resource allocation, budget formulation, data/information quality, and business analytics; (4) helps to build capacity within the organization for using data and evidence to inform management decision-making; and (5) identifies and evaluates innovative strategies that lead to accessible, effective, and culturally appropriate care.

Associate Director for Healthcare Workforce Development (ADHWD) (Gxx)
The Associate Director for Healthcare Workforce Development (ADHWD): (1) oversees the IHS Scholarship and Loan Repayment programs; (2) provides expert advice and guidance related to strategic workforce development; (3) develops and manages partnerships with universities, states, and nonprofits to provide student mentoring, residency, fellowship, and other programs designed to draw students to employment with the IHS;

**Office of Scholarships and Loan Repayment (OSLR) (Gxxx)**

(1) Manages the Agency-wide scholarship and loan repayment programs; (2) coordinates HQ activities for residency and training programs; (3) partners with the National Health Service Corps (NHSC) program, including liaison and assignment of NHSC scholarship recipients to IHS; (4) coordinates the updating of Health Professional Shortage Area site scores IHS-wide; (5) coordinates placement of professionals with loan repayment and scholarship obligations; (6) serves as IHS coordinator for preparatory, pre-graduate and health professions IHS scholarship recipients; (7) processes waivers and defaults of participants in IHS scholarship programs and the IHS loan repayment program (LRP) consistent with authorizing legislation; (8) coordinates the debt management function with the HHS Program Support Center; (9) manages and supports health professions education programs and activities; (10) coordinates scholarship and LRP program administration in collaboration with the Division of Recruitment and Outreach with the IHS Area Office and Service Unit staff, including Chief Medical Officers, Clinical Directors, and professional recruiters; (11) develops, administers, and evaluates all IHS scholarship programs; and (12) coordinates the evaluation of scholarship and loan repayment priorities with the respective disciplines and national councils.

**Office of Strategic Workforce Planning (OSWP) (Gxxx)**

(1) Builds relationships with universities, non-profit, and state organizations to establish residency, fellowship, or other training programs for students to be placed in IHS; (2) coordinates with HRSA’s National Health Service Corps (NHSC) program to ensure IHS site scores are updated appropriately to facilitate the assignment of NHSC scholars and loan repayment recipients to IHS and Tribe locations; (3) coordinates with the OHR Division of Recruitment and Outreach on recruitment strategies such as advertising, direct contacts, use of search committees, etc. for increasing applicants to vacancy announcements; (4)