Greetings from the Bemidji Area Office. We have had a busy three months since my last communication in this format. I would like to share some of the highlights.

RENEW AND STRENGTHEN OUR PARTNERSHIP WITH TRIBES

It was a pleasure to meet with many of you during the Region V DHHS Consultation session (co-sponsored by MAST) in Petoskey, MI on February 16 and 17, 2012. In a new format for the meeting, Tribes had the opportunity to meet individually with the various agency representatives. Deanna Dick and I came home with a lengthy issue list and have worked with Area Staff to prepare responses and assistance. Issues included information technology (IT), funding (overall and specific programs), prescription drug abuse, facilities, water quality, desired new services, long term care, user population, billing, electronic health records and meaningful use, cancer and hepatitis C rates. In the general session, the major themes for IHS were funding (funding parity, contract support costs, behavioral health, Special Diabetes Program I (SDPI), healthcare facilities), consultation (federal and state), prescription drug abuse, Contract Support Cost (CSC) data, Federal Advisory Committee Act (FACA) impact, and Affordable Care Act (ACA) training.

The Area is responding to individual Tribes on the one on one issues. You will find many of the national issues addressed on the IHS Directors blog at www.ihs.gov/PublicAffairs/DirCorner. Region V DHHS will be sending out follow-up reports for issues discussed at the general sessions.

Phyllis Davis (Gun Lake) and Robert Two Bears (Ho-Chunk) represented area Tribes at the DHHS Budget Consultation meeting in Washington DC March 7-9, 2012. The Tribal recommendations for FY14 Budget were presented. The complete budget formulation document is available on the National Indian Health Board (NIHB) website http://www.nihb.org/legislative/budget_formulation.php.

Dr. Roubideaux, IHS Director, held a listening session during the MAST Impact Week meeting in Washington DC on March 26, 2012. Tribal issues raised during this session included prescription drug abuse and treatment costs and options, and traditional healing. Dr. Roubideaux noted these topics will be discussed at the Combined Councils meeting in July and could be added to the agenda for the Tribal Summit.

IHS held the second Tribal Consultation Summit on March 13 and 14. This is a one stop shop opportunity to learn about IHS Tribal consultation activities, hear updates from IHS Tribal workgroups and committees and provide feedback and recommendations. There was a session on facilities construction, as well as CHS, CSC, IT shares, VA, ICD-10, FACA, long term care, recruitment and retention, data sharing agreements and ACA. The next summit will be held in Denver, CO on August 7-8, 2012.

Region V DHHS Director Kenneth Munson, Deanna Dick and I had the opportunity to tour the Little River Band, Grand Traverse Bay Band, and Little Traverse Bay Band health facilities and visit with staff on February 15th. These site visits were very informative and it is always a delight to see the work in health being done by the Tribes in this area.
The next scheduled orientation for Tribal Leaders and Health Directors/staff will be in Bemidji on April 11th. Please let Carol White (218-444-0453) know if you will be attending or would like to join by video or teleconference.

The Bemidji Area Pre-Negotiation meeting is scheduled for May 16-17, 2012 in Bloomington, MN. A save the date notice has been sent. Hotel information and the agenda are forth-coming.

REFORM TO IHS

Contract Health Service (CHS) reforms are underway. Many of the issues from the Bemidji Area listening session last March are included in the reforms. You may find all recommendations in the September 2011 postings to the IHS Directors blog www.ihs.gov/PublicAffairs/DirCorner. We want to thank you and your staff for providing information on CHS unmet need at your sites.

We recently sent out an email requesting your feedback on two Contract Support Cost (CSC) issues on behalf of the Bemidji representatives to the CSC workgroup, Cathy Chavers, Bois Forte Councilwoman and David Waupoose, Menominee Tribal designee.

IMPROVE QUALITY AND ACCESS TO CARE

The Improving Patient Care (IPC-3) collaborative year is ending and the programs will meet for a knowledge gathering session next week. We hope they bring back lots of new ideas. We have learned so much by having representatives from IPC sites be part of the Area Improvement Support Team. We have not yet heard which additional programs will become part of IPC-4. Applications were due last week.

TRANSPARENCY AND ACCOUNTABILITY

I hope you will visit the Bemidji Area webpage (http://www.ihs.gov/Bemidji/) and provide us feedback on potential improvements. We are working to make this a useful tool for you and your staff as well as those who may be looking for information about area Tribes or healthcare in the region. This month we added information on your programs through posting your webpage links and the area calendar. In the future these quarterly communications will also be posted on the site. With easier access to your sites from the webpage, I am enjoying learning more about the many programs and services you are offering your members. I am always impressed by the creativity and ingenuity shown in Tribal programming.

Two areas that Tribes have had questions about are the Affordable Care Act and Veteran’s Benefits for Indian people. Two meetings will be held at Mystic Lake Hotel and Casino in Shakopee, MN April 17-19 (ACA on 4/18-19 and VA on 4/17-18). We have sent information out on both meetings by separate email but you may register with Peter.Vicaire@va.gov or 612-629-7587 for the VA meeting and may register at http://www.cvent.com/d/gcqlgt/4w for the National Health Outreach and Education National Health Reform Training.