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Dear Tribal Leader:

As the Department of Health and Human Services (HHS) strengthens efforts to improve services, outreach, and consultation to American Indians and Alaska Natives (AI/AN), the Indian Health Service (IHS) and the Health Resources and Services Administration (HRSA) continue to work collaboratively to better serve Tribal nations.

With the passing of the Affordable Care Act and permanent authorization of the Indian Health Care Improvement Act, IHS and HRSA continue to align their efforts to reshape the way we interact with our Tribal partners and support the priorities of the Department. Our leadership is committed to renewing and strengthening partnerships with Tribes, improving the quality of and access to care, and making our work more accountable, transparent, fair, and inclusive.

Communication and Outreach

Strengthening relationships and communications between our Agencies and with AI/AN stakeholders is one of our top priorities. IHS and HRSA staffs meet quarterly, and continue to engage with various Tribal entities at national conferences, regional consultations, and through specific programmatic conferences. At the departmental level, Secretary Sebelius has reestablished the Secretary's Intradepartmental Council on Native American Affairs, providing a forum for all HHS agencies to develop short, intermediate, and long-term improvements in policies and programs that impact AI/AN populations.

Recognizing the need to provide targeted technical assistance, HRSA plans to hold a stakeholders workshop in the near future. This workshop will be an opportunity for our staff to provide information on the HRSA grant process; it will be devoted to learning from our AI/AN stakeholders how we can best facilitate and support Tribal health care. Similar informational exchange opportunities are currently in the planning phase and we are exploring additional ways to push-out information through IHS and HRSA web sites.

Access to Care

The Affordable Care Act will expand coverage to millions of Americans. HHS is working diligently to implement the law and several key benefits have already been enacted. Certain provisions will be managed by HRSA and will impact access to care in AI/AN communities; among them are the establishment of the Negotiated Rulemaking Committee, expanded service of the Health Center Program, and the creation of the Maternal, Infant, and Early Childhood Home Visiting Grant Program.

The Negotiated Rulemaking Committee (which includes two Tribal representatives) authorized under the Affordable Care Act will redefine the methodology and criteria for the designation of Medically Underserved Areas and Populations (MUA/Ps) and Health Professional Shortage

Areas (HPSAs). HPSA designations are primarily used for the placement of National Health Service Corps clinicians; and MUA/Ps are used to determine eligibility for health center funding. The defining of what is an MUA/P or a HPSA is critical to the health of Indian country. Currently, 27 NHSC providers serve in dual-funded health centers – health centers that receive funding from both HRSA’s Health Center Program and IHS funding. With implementation of the Affordable Care Act, there is an opportunity for that number to grow.

HRSA recently announced a New Access Point competition making available \$250 million in grants to approximately 350 new sites interested in creating a health center to deliver primary health care services for underserved populations. Guidance for this grant and upcoming funding opportunities can be found at www.hrsa.gov/grants/index.html and www.grants.gov. An additional opportunity to improve the health of Tribal communities is the Maternal, Infant, and Early Childhood Home Visiting Grant Program. Recently, \$3 million in grants were awarded to 13 Indian Tribes, Tribal organizations and Urban Indian organizations under the Affordable Care Act. The Home Visiting Program is a collaborative partnership between the Administration for Children and Families and HRSA, with guidance from IHS. This program will provide evidence-based home visitation services to improve health outcomes for children and families who reside in at-risk communities.

As we continue to move forward in partnership, IHS and HRSA will develop strategies to ensure that Tribes and Tribal members optimize their ability to benefit from our direct service delivery programs. Working together, we are developing strategies to restructure grants programs to better accommodate Tribal needs. Collectively, we are grateful for the opportunity to work with AI/AN communities and look forward to future joint efforts to advance IHS and HRSA missions in providing access to culturally competent and quality health care for all AI/AN populations. We will update you on our shared progress on a continuing basis. If you have any additional comments or suggestions for collaborative efforts between IHS and HRSA, please do not hesitate to email us at consultation@ihs.gov.

Sincerely,

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