

Indian Health Service

All Tribes and Urban Indian Organization Leaders Call

RADM CHRIS BUCHANAN

DEPUTY DIRECTOR

SEPTEMBER 10, 2018



Welcome



Rear Admiral Chris Buchanan
Deputy Director, Indian Health Service



IHS Personnel Updates



Darren Pete
Director, Office of Congressional & Legislative
Affairs



Agenda

- IHS Updates
 - RADM Buchanan, IHS Deputy Director or Elizabeth Fowler, Deputy Director for Management Operations
- IHS Strategic Plan fiscal years 2018-2022
 - CAPT Francis Frazier, Director for the Office of Public Health Support
- Indian Health Care Improvement Fund (IHCIF) and ISDEAA 105(I) Leases
 - Ann Church, Acting Director for the Office of Finance & Accounting and Elizabeth Fowler, Deputy Director for Management Operations
- Accreditation & CMS Surveys
 - Jonathan Merrell, Acting Deputy Director for Quality Health Care



Tribal Consultation and Urban Confer Updates

- Indian Health Care Improvement Fund formula
 - Final decision shared on August 17, 40 sites received a total of \$72 million in IHCIF allocations
 - “Phase Two” Workgroup meeting held on August 29-30
- Behavioral health initiatives
 - National Tribal Advisory Committee on Behavioral Health will October 25-26
- Proposed updates to the Sanitation Deficiency System Guide
 - Comment period extended to September 14
- Proposed revisions to Purchased/Referred Care Chapter
- Reprogramming of inflation funding increases



2018 Cooperative Agreement Awards

Planning Cooperative Agreement Awards

Tribe/Tribal Organization	City	State	Amount Awarded
Round Valley Indian Health Center, Inc.	Covelo	CA	\$120,000
Shoshone-Bannock Tribes	Fort Hall	ID	\$120,000
Pueblo of Santa Ana	Santa Ana Pueblo	NM	\$120,000
Hopland Band of Pomo Indians	Hopland	CA	\$120,000
Iowa Tribe of Kansas and Nebraska	White Cloud	KS	\$120,000
Mashpee Wampanoag Tribe	Mashpee	MA	\$72,000
Lac Vieux Desert Band of Lake Superior Chippewa Indians	Watersmeet	MI	\$72,000

Negotiation Cooperative Agreement Awards

Tribe/Tribal Organization	City	State	Amount Awarded
Ak-Chin Indian Community	Maricopa	AZ	\$48,000
Paskenta Band of Nomlaki Indians	Corning	CA	\$48,000

Recent Events

- National Combined Councils Meeting
- National Committee on Heroin, Opioids, and Pain Efforts (HOPE) Meeting
- Youth Regional Treatment Center Site Visit



Rear Adm. Weahkee speaks at NCC meeting



HOPE Committee Meeting



Rear Adm. Weahkee visits the Youth Regional Treatment Center



Recent Events

- Older Americans Act - Title VI Tribal Consultation and Listening Session
- National Indian Health Board Quarterly Meeting
- Community Health Aide Program Tribal Advisory Group Meeting



Community Health Aide Program Tribal Advisory Group



Recent Events

- HHS Region 4 Tribal Consultation Meeting
- Department of Justice, 13th Annual Violence Against Women Tribal Consultation



HHS Region 4 Tribal Consultation Meeting



Violence Against Women Tribal Consultation

Recent Events

- Visit to Supai, Arizona
 - Meeting with Havasupai Tribal Council and Supai Health Station visit
- Meeting with Hualapai Tribal Chairman Dr. Damon R. Clarke
 - Peach Springs Health Center visit



Supai Health Station



Rear Adm. Michael Weahkee and Chairman Dr. Damon R. Clarke

Recent Events

- Phoenix Area Tribal Consultation and Urban Confer
- National Native American Law Enforcement Association annual training event – panel discussion on the opioid crisis in Indian Country



Recent Events

- Indian Health Care Improvement Fund Workgroup Meeting
- HHS Region 3 Tribal Consultation in Henrico, Virginia
- Boys & Girls Club of America: “Friends in Indian Country,” Atlanta, GA



IHCIF Workgroup



HHS Region 3 Tribal Consultation



Boys & Girls Club of America

Upcoming Events

- September 11-12: National Indian Council on Aging, Temecula, CA
- September 14: Albuquerque Area Awards Ceremony, New Mexico
- September 17: Tribal Diabetes Committee Meeting, Oklahoma City, OK
- September 17-20: National Indian Health Board National Tribal Health Conference, Oklahoma City, OK
- September 24-25: Secretary's Tribal Advisory Committee Meeting, Fairbanks, AK
- October 2-3: Direct Service Tribes Advisory Committee Meeting, Washington, DC
- October 3-4: Tribal Self-Governance Advisory Committee Meeting, Washington, DC



Draft IHS Strategic Plan

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Draft IHS Strategic Plan

- Federal Register Notice published July 24th.
- Comments accepted through August 23rd.
- IHS received 123 comments from 30 Tribes, national organizations and individuals.
- Comments cover a wide range of topics including the mission, vision, goals, objectives, strategies and other general comments not specifically related to the Draft IHS Strategic Plan.



Resources

- IHS Strategic Plan web site
 - <https://www.ihs.gov/strategicplan/>
- Questions: E-mail the IHS Strategic Plan team
 - IHSStrategicPlan@ihs.gov



IHS Budget Update

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IHS Budget Updates: Fiscal Year 2018

Indian Health Care Improvement Funds: Final allocations of the \$72 million received in the FY 2018 appropriation were announced on August 17. The letter announcing the results of consultation and identifying the final allocations is available at: <https://www.ihs.gov/newsroom/triballeaderletters/>

- Results include:
 - Changing the benchmark from the Federal Employee Health Benefits Program to the National Health Expenditure to more accurately reflect currently authorized programs
 - Revising the standard user population factor from regionally unduplicated users to nationally unduplicated users, and adding non-Purchased/Referred Care Delivery Area users, which will provide a more accurate user population
 - Changing the alternate resources calculation from a 25 percent across the board estimate to use of statewide coverage averages that improve the accuracy of the current formula and acknowledge the impact of Medicaid differences
 - Issuing recurring allocations to sites with a Level of Need Funded percent lower than 34.84 percent



Visit the IHCIF Web site at www.ihs.gov/ihcif for more information, including all sites' updated LNF percentages.

IHS Budget Updates: Fiscal Year 2018

The IHS/Tribal IHCIF Workgroup - Phase II: The Workgroup kicked off Phase II of their work August 29-30 in Rockville, Maryland.

- The Workgroup is evaluating the impact of the FY 2018 IHCIF formula updates and considering additional potential revisions, with a focus on:
 - PRC Dependency
 - Distance to a Level II Facility
 - Facility Condition
 - Program Size
 - Fractionalization (User Population)
 - Medicaid Coverage Gaps
 - Sensitivity Analysis of Local Adjustment Factors

Next meetings: December 12-13 in Rockville, MD; and February 12-13, 2019, in tandem with the IHS National Tribal Budget Formulation Workgroup Meeting (February 14-15, 2019), in the DC/VA Metro Area



IHS Budget Updates: Fiscal Year 2018

Funding for ISDEAA 105(I) Leases: A final decision resulting from the July consultation and confer on FY 2018 funding for the increasing number of ISDEAA Section 105(I) lease cost agreement proposals will be communicated by letter this week.

- The IHS has received a total of 77 proposals totaling over \$28 million as of the end of August.
- The IHS is required to use funds from the IHS Services appropriation to pay these costs, but does not have a specific resource just for ISDEAA 105(I) lease cost agreements.
- Tribal Consultation and Urban Confer will be initiated again in FY 2019 to discuss sustainable options to address or resolve this funding requirement for FY 2019 and beyond.



IHS Budget Updates: Fiscal Year 2019

- **House Mark: \$5.9 billion**, an increase of \$370 million over FY 2018
 - Increases included for federal/tribal pay costs, staffing/operating costs of newly-constructed health care facilities, IHCIF, new Tribes, tribal clinics, Urban health, scholarships and loan repayment, and CSC
- **Senate Mark: \$5.8 billion**, an increase of \$234 million over FY 2018
 - Increases included for staffing/operating costs of newly-constructed health care facilities, new Tribes, tribal (village built) clinics, \$10M in opioid grants, and CSC
- **Both Marks:** Restore funding for programs proposed for discontinuation (Health Education, Community Health Representatives, and Tribal Management Grants); continue SDPI as mandatory
- **Next Steps:** Conference committee and congressional action
 - Discussions are ongoing; House Conferees named on September 6
 - Final appropriation, continuing resolution, or minibus appropriation



IHS Accreditation Update

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Overview of Accreditation in IHS

- It is the goal for all IHS facilities to achieve accreditation by a National Accreditation Organization
 - In 2016 IHS awarded contracts for accreditation of hospitals and health centers to the Joint Commission (TJC) and the Association for Accreditation of Ambulatory Health Care (AAAHC)
- Current Accreditation
 - 69% of the 26 IHS operated hospitals are accredited
 - 97% of the 30 IHS operated health centers are accredited
- In 2016 IHS directed that all IHS ambulatory care facilities obtain designate as PCMH by a national accreditation organization or a CMS approved state based program
- Currently
 - 67% of the 30 IHS operated health centers are designated
 - 8% of the 26 hospital based ambulatory care are designated



Common Deficiencies from CMS Surveys

- Emergency services – Failed to ensure timely and accurate medical screening examinations were completed. Failed to appropriately stabilize and transfer patients. Failed to ensure policies and procedures were followed.
- Infection control – Failed to ensure an effective hospital wide infection control program. Failed to have a system in place to follow policy in reporting surveillance activities and failed to analyze data.
- Quality assurance and performance improvement – Failed to ensure the facility's QAPI program was effective, ongoing, hospital wide, and data driven that reflected the complexity of the hospital's organization and services.
- Governing body – Failed to ensure an effective governing body was in place to ensure compliance with regulations and professional standards including ensuring a competent medical staff including contracted staff.
- Medical staff – Failed to evaluate and monitor the care provided by medical staff and do periodic appraisals to credential staff and ensure qualifications.



Overview of Most Recent Surveys

- Gallup Indian Medical Center (GIMC) - Hospital
 - CMS visit week of August 20-24, 2018
 - Successful Hospital Survey
 - Full CMS compliance status for hospital
 - GIMC laboratory services will have resurvey due to identified deficiencies
- Crow Hospital – Critical Access Hospital
 - August 10, 2018: CMS notified IHS Crow/Northern Cheyenne Hospital it is in full compliance with Medicare Conditions of Participation
- Rosebud Hospital – Hospital
 - Immediate Jeopardy abated at August 17 Exit conference.
 - Conditional findings identified
 - Corrective Action Plan to 2567 due September 7
 - Plan for re-survey after September 17, 2018



Overview of Most Recent Surveys, cont.

- Pine Ridge Hospital
 - IHS continues to work towards CMS certification
 - Surgical services reopened with ongoing review of cases by IHS clinical consultants
- Cass Lake Hospital – Critical Access Hospital
 - CAP submitted August 16, 2018 related to June 28 Cass Lake Hospital EMTALA violation
 - EMTALA Policy approved by Governing Board August 13, 2018 and 93% training completed for EMTALA and Suicide Care policies (as of 8/31/18)
 - CMS Revisit survey anticipated in mid October



