### Indian Health Service All Tribal and Urban Indian Organization Leaders Call

JULY 8, 2021



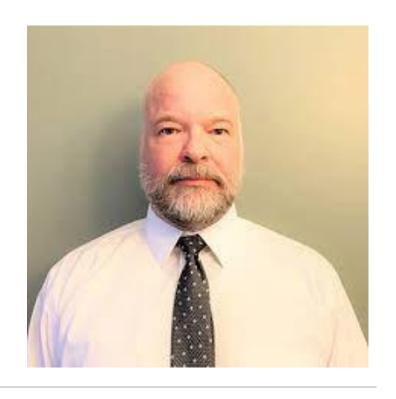
## Welcome & Agency Update



Ms. Elizabeth Fowler
Acting Director
Indian Health Service



## IHS Facilities Appropriations Advisory Board



James Ludington

Director

Office of Environmental Health & Engineering



### Facilities Appropriation Advisory Board

- There are 12 Tribal and 2 Federal representatives on the FAAB.
  - Dr. Charles Grim, Secretary, Chickasaw Nation Department of Health, is the Chair of the FAAB and represents OKC Area.

AREA	FAAB Members Present	Representing (Area/Tribal)		
Alaska	Mr. James Roberts	ANTHC		
Albuquerque	Mr. Martin Lopez, Jr.	Ysleta del Sur Pueblo		
Bemidji	Vacant			
Billings	Mr. Richard Brannan	Wind River Family and Community Health Care		
California	Mr. Michael Garcia	Southern Indian Health Council		
<b>Great Plains</b>	Mr. Vincent Two Lance Jr.	Oglala Sioux Tribe		
Nashville	Mr. Casey Cooper	Eastern Band of Cherokee Indian		
Navajo	Mr. Jonathan Nez	Navajo Nation		
Oklahoma	Dr. Charles Grim	Chickasaw Nation Department of Health		
Phoenix	Mr. Ricardo Leonard	Salt River Pima Maricopa Indian Community		
Portland	Mr. Eric Metcalf	Coquille Indian Tribe of Oregon		
Tucson	Ms. Wavalene Saunders	Tohono O'dhom Nation		
IHS	Mr. James Ludington	Federal Representative		
IHS	CDR Craig Morin	Federal Representative		

### Facilities Appropriation Advisory Board

- The FAAB met virtually on June 3, 2021
- The previous meeting was April 12, 2021
- The next meetings are scheduled for Sept. 2 and Dec. 2, 2021
- Topics covered included:
  - Joint Venture Construction Program (JVCP) Criteria
  - o 2021 IHS and Tribal Health Care Facilities' Needs Assessment Report to Congress
  - Health Systems Planning (HSP) Update
  - ○105(I) Update
  - Facilities Needs Assessment Workgroup (FNAW) leadership.
    - FNAW is a sub-committee to the FAAB that provides technical assistance to members.
    - Paul Morrison, ANTHC, was approved to be the Tribal Co-Chair of the FNAW.
    - CAPT Jason Lovett (POR) was selected to be the Federal Co-Chair.
    - Workgroups for the JVCP criteria, Supportable space and Fair updates.



### Health System Planning

- HSP is an IHS web-based software tool for the planning, programming and design of health facilities.
- The program uses community population to determine health care services, space, and staff.
- HSP is accessible to anyone.



HSP Web site: <a href="https://hsp.ihs.gov/index.cfm#MainContent">https://hsp.ihs.gov/index.cfm#MainContent</a>

### Health System Planning – New Programs

### **Dialysis**

Working on Staffing

#### **Mental Health Inpatient**

In testing

### **Long Term Care**

Working with a contractor to develop

#### **Urban Health**

Updating Criteria





### Reports To Congress

- The IHS is required to submit a Facilities Needs Assessment Report to Congress every five years.
- The Facilities Appropriation Advisory Board authorized the Facilities Needs Assessment Workgroup to update the Report to Congress with current data.





### Report To Congress – Current Findings

- The overall health care facility construction need grew from \$14.5 billion in 2016 to \$23 billion in 2021 due to expanded programs and better reporting.
- Facilities construction appropriations have only averaged \$194 million annually since the last report was submitted to Congress.



### **Small Ambulatory Program**

- This program provides funds to tribes that present acceptable proposals to construct, expand or modernize the tribe's ambulatory program which are tribally-operated non-IHS facilities.
- This program is available to Urban Programs.



### **Small Ambulatory Program**

Contacts for this Program:

**CDR Ombogie Amadasu** 

Ombogie.Amadasu@IHS.gov

**Steven Raynor** 

Steven.Raynor@IHS.gov



### **New Priority List**

- The 1993 Priority List may be fully funded in the next 5 Years
- A New 2 Phase Priority System has been developed

In Phase I, All IHS Area health care facilities in are scored using these Factors:

- A. The population's health status, Considers
  - ✓ Birth Disparities Indicator (BDI)
  - ✓ Percent of the population over 55 years old (Pop>55)
  - ✓ Composite Poverty Indicator (CPI)
  - ✓ Disease Disparity Indicator (DDI)
- B. The isolation of the population (Distance to nearest Emergency Room)
- C. The size of the required facility

In Phase II, the top facilities are scored by a Validation Committee using these Factors:

- A. Barriers to services
- B. Innovations and/or operation of a facility, and
- C. Alignment with the area Master Plan

# IHS Tribal Leaders Diabetes Committee – Special Diabetes Program for Indians



Darrell LaRoche

Director

Office of Clinical and Preventive Services



### Special Diabetes Program for Indians Updates: FY 2021

- FY 2021 is the 6th year of a 5-year grant cycle
  - Given COVID-related challenges for SDPI programs, it was approved by HHS to have FY 2021 be added as a sixth year to the current grant cycle (ending on 12/31/2021)
- ALL SDPI grantees have received their annual grant amounts for FY 2021 (including offsets)
  - Currently, a total of 63 SDPI FY 2021 grants received an offsets of 50-100% of their annual grant amount.
    - Offsets were determined by the Division of Grant Management based on unobligated SDPI balances from previous years.

### Special Diabetes Program for Indians (SDPI) Updates: FY 2021

- FY 2021 is the 6th year of a 5-year grant cycle
  - Given COVID-related challenges for SDPI programs, it was approved by HHS to have FY 2021 be added as a sixth year to the current grant cycle (ending on 12/31/2021)
- ALL SDPI grantees have received their annual grant amounts for FY 2021 (including offsets)
  - Currently, a total of 63 SDPI FY 2021 grants received an offsets of 50-100% of their annual grant amount.
    - Offsets were determined by the Division of Grant Management based on unobligated SDPI balances from previous years.

### SDPI FY 2021 Supplemental Funding

### One-Time SDPI Supplements:

- •\$30 million (M): primarily from FY 2020 grant offsets plus some unobligated prior year grant and administrative funds
- Tribal Consultation/Urban Confer: July 2-Aug 28, 2020
- Tribal Leaders Diabetes Committee (TLDC) met Sept 22, 2020
  - Reviewed the consultation and confer responses and voted unanimously to recommend that the \$30M be split among current SDPI grantees in proportion to current grant amounts

### SDPI FY 2021 Supplemental Funding (cont.)

- SDPI grantees were made aware of this one-time supplemental funding opportunity and how to submit a request via email on 3 separate occasions.
  - According to grants management policy, grantees could request any amount up to 25% of their annual grant amount or a maximum of \$250,000.
  - SDPI grantees began submitting their supplement requests on 4/15
  - Supplemental opportunity announcements have been made on all SDPI webinars and information/guidance is posted on the <u>SDPI website</u>
  - Deadline for submitting a supplemental funding request is 8/13/21
- To date, 50 grantees have been approved for a one-time 2021 SDPI supplement
  - Programs that received a grant offset for FY 2021 were NOT eligible for this additional funding.

### SDPI Updates: FY 2022

- The next SDPI grant cycle will be from FY 2022 to FY 2026 (starting on January 1, 2022)
  - Notice of Funding Opportunity Announcement (NOFO) to be published on or before 7/31/21
- Congress has funded SDPI at the current \$150M/year through 2023
  - There is no way to include new grants without decreasing the amounts of existing grants
  - A competitive continuation process will be used for the FY 2022-FY 2026 grant cycle
    - Only current SDPI grantees can apply and they compete against a fundable score, NOT against each other
      - ALL current grantees will receive FY 2022 funding if the grant submission requirements are met per grants policy
  - The FY 2022 President's Budget includes funding at \$147 million, a \$3M decrease due to a mandatory sequester.
    - 2022 annual SDPI grant amounts will NOT be affected by this sequestration

### Tribal Leaders Diabetes Committee Meeting

### Last quarterly virtual TLDC meeting occurred on 6/15/21

#### Meeting Highlights:

- DDTP and SDPI updates were provided
  - Carmen Hardin was introduced as the Acting IHS DDTP Director
- Legislative Updates were provided by the National Indian Health Board
  - Discussed current legislation regarding funding for IHS and SDPI
- The Center for Medicare & Medicaid Services (CMS) Office of Minority Health introduced the Diabetes Self-Management Education in Rural Areas Project to the TLDC.
- TLDC members provided Area updates
- TLDC met virtually with Ms. Fowler
  - COVID-19 updates were provided

#### Next quarterly meetings:

- 9/14/21 from 1-5 pm ET (virtual)
- 12/8/21 from 1-5 pm ET (virtual or hybrid—TBD via a committee vote at the 9/14 meeting)

### Vacancy Announcement – Director, DDTP

- The Indian Health Service (IHS) is seeking applicants for a **Supervisory Physician/Director for the Division of Diabetes Treatment and Prevention (DDTP).** This position will lead, plan, coordinate, and evaluate programs and initiatives within DDTP. The physician hired into this position will have a unique opportunity to impact the provision of clinical and public health programs nationally.
- Physicians with significant experience and skills in clinical care (preferably with American Indian/Alaska Native patients), public health, and/or administration are encouraged to review the Vacancy Announcement and apply before 7/30/21 via this link: <a href="https://www.usajobs.gov/GetJob/ViewDetails/606535500">https://www.usajobs.gov/GetJob/ViewDetails/606535500</a>

### Special Diabetes Program for Indians

- Congress established SDPI through the Balanced Budget Act of 1997
  - FY 2021 is the 24th year for SDPI
- \$150 million per year grant program
- Funds 301 IHS, Tribal, and Urban (I/T/U) Indian health programs in 35 states across the nation
  - 233 Tribal grants
  - 29 Urban grants



### SDPI Funding/Authorization

- SDPI was authorized through May 22, 2020 through the Further Consolidated Appropriations Act, 2020.
- The CARES Act authorized SDPI through November 30, 2020.
- The Continuing Appropriations Act, 2021 and Other Extensions Act authorized SDPI through December 11, 2020.
- The Further Continuing Appropriations Act, 2021, and Other Extensions Act authorized SDPI through December 18, 2020.
- The Consolidated Appropriations Act, 2021 authorized SDPI until September 30, 2023.

### IHS Scholarship & Loan Repayment Programs

**CAPT Francine Barnett** 

Director

Division of Health Professions Support

Office of Human Resources



### IHS Scholarship and Loan Repayment Program

- Annual survey seeking Tribal and Urban input on priority disciplines for the Scholarship and Loan Repayment programs is extended until July 30, 2021
- Approved disciplines will be available on the <u>www.ihs.gov/scholarship</u> or www.ihs.gov/loanrepayment site in September
- Scholarship awards processing for academic year 2021-2022 is underway
- Loan Repayment program awards are in process
- Scholarship application window for academic year 2022-2023 opens
   December 2021

### Scholarship Program Awards- FY2020

rofessional - 8 student	ts		
4 Pre-Pharmacy		4	
graduate – 40 students	5		
8	8 Pre-Optometry 2		
30			
Professions - 218 stude	ents		
3	Pharmacy	24	
17	Physical Therapy	10	
2	Physician Assistant		
7	Optometry 15		
5	Physician, Allopathic	46	
17	Physician, Osteopathic		
1	Podiatry		
3	Social Work	10	
4			
	4	8 Pre-Optometry 30 Professions - 218 students  3 Pharmacy Physical Therapy Physician Assistant Optometry Dhysician, Allopathic Physician, Osteopathic Podiatry Social Work	

Scholarship 103 Programs	Degree Programs	American Indian/Alaska Native *	Service Commitment	Years of Funding
Preparatory	Pre Nursing -Sophomore level -leading to a bachelor degree of science	Descendants and members of federally or state-recognized Tribes are eligible.	None	Uptotwo
Pre Graduate	Pre Medicine -Junior/Senior level -leading to a bachelor degree of science  Pre Dentistry -Junior/Senior level -leading to a bachelor degree of science	Descendants and members of federally or state-recognized Tribes are eligible.	None	Up to four
Scholarship 104 Program	Degree Programs	American Indian/Alaska Native*	Service Commitment	Years of Funding
Health Professions Bachelor, Master, and Doctoral Programs	Must be enrolled in the program by August 1, 2021.  Bachelor Degree Program -Nursing  Master Degree Programs -Nurse Midwife -Nurse Practitioner -Social Work (clinical) -Physician Assistant  Doctoral Degree Programs -Clinical Psychology -Pharmacy -Counseling Psychology -Physician, Allopathy -Dentistry -Physician, Osteopathy -Nurse Anesthetist -Physical Therapy -Nurse Practitioner (DNP) -Podiatry -Optometry -Chiropractor	Members of federally recognized Tribes are eligible.  *Upon request, you must submit American Indian/Alaska Native documentation.	Minimum two years of service commitment at an approved site. One year of service per year of support for scholarship received, thereafter.  Please note that some jobs may be limited to certain geographic areas within the Indian Health Service. For questions about potential service obligation sites, please contact ihsrecruiters@ihs.gov.	Uptofour

### IHS Loan Repayment Program 2021 Awards – as of June

Profession	New Awards	Extension Awards	Total Awards
Physicians	35	90	125
Nurses	135	75	210
Dentists	25	70	95
Behavioral Health	20	39	59
Pharmacists	127	145	272
Optometrists	6	50	56
Mid-Level Practitioners	54	95	149
Podiatry	5	15	20
Rehabilitative Services	25	58	83
Other Health Professions	37	12	49
TOTAL	469	649	1,118

