Indian Health Service All Tribal and Urban Indian Organization Leaders Call

NOVEMBER 18, 2021



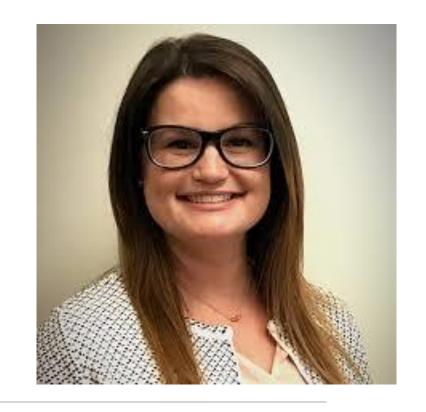
Opening Remarks

RADM Chris Buchanan
Acting Deputy Director
Indian Health Service





IHS Budget Update:
American Rescue Plan
Act, Infrastructure
Investment and Jobs Act,
and Build Back Better Bill



Ms. Jillian Curtis

Chief Financial Officer and Office of Finance & Accounting Director

Indian Health Service



New or Potentially New Funding

The IHS is planning consultation and confer activities on three new or potentially new funding sources in mid-December.

- \$210 million in additional American Rescue Plan Act funding allocated to the IHS by HHS for Public Health Workforce activities
- \$3.5 billion appropriated to the IHS in the Infrastructure Investment and Jobs Act
- \$2.35 billion for the IHS currently under consideration by Congress as part of the Build Back Better bill

American Rescue Plan Act

The American Rescue Plan Act appropriated \$7.7 billion to HHS for Public Health Workforce Activities.

- HHS allocated \$210 million of that amount to the IHS for specific purposes. The White House announced this allocation on November 10.
- These funds are in addition to the \$240 million for Public Health Workforce activities that the IHS received in direct appropriations from the ARPA.

Uses of Funds

The HHS allocation includes funding for the following IHS activities:

- \$92 million to support nurses in Bureau of Indian Education Schools
- \$67 million to enhance public health capacity and preparedness for IHS and Tribes
- \$45 million for additional loan repayment awards
- \$6 million for core surveillance and epidemiology functions

Infrastructure Investment & Jobs Act

The President signed the Infrastructure Investment and Jobs Act on November 15. This Act was often referred to as the "Bipartisan Infrastructure Bill."

- The IIJA includes \$3.5 billion over five years for the IHS Sanitation Facilities Construction program (\$700 million/year).
- This funding level is sufficient to address the current estimate of all projects in the Sanitation Deficiency System as of today.

Infrastructure Investment & Jobs Act (Cont.)

The Act includes several important directions to the IHS.

- Directs that up to \$2.2 billion should be used for "economically infeasible" projects
- Caps funding for "salaries, expenses, and administration"
- Allocates 0.05% of funds each year to the HHS Office of the Inspector General for oversight activities

Build Back Better Bill

Congress is currently considering the Build Back Better bill. The current draft includes \$2.35 billion for the IHS, including:

- \$1 billion for the Health Care Facilities Construction Priority List
- \$945 million for maintenance and improvement projects
- \$40 million for the Small Ambulatory program
- \$113 million for Facilities and Environmental Support
- \$100 million for Urban Indian Organization facilities needs
- \$124 million for behavioral health services, including relevant facilities needs
- \$25 million for Tribal Epidemiology Centers

Tribal Consultation: Draft HHS Strategic Plan Fiscal Years 2022–2026

U.S. Department of Health and Human Services
Assistant Secretary for Planning and Evaluation (ASPE)

ASPE Introductions



Margo Bailey, PhD
Director,
Division of Strategic
Planning
Secretary for Planning
and Evaluation (ASPE)



Irvin Moore, PhD
Social Science
Analyst

Why is this important?

The HHS Strategic Plan communicates the Secretary's vision for how HHS will achieve the priorities of the current Administration in alignment with the scope and breadth of the entire Department.

Draft HHS Strategic Plan FY 2022–2026

Available at: https://www.hhs.gov/about/draft-strategic-plan/index.html

HEALTH CARE

Protect and Strengthen Equitable Access to High Quality and Affordable HealthCare

- 1.1. Increase choice, affordability and enrollment in high-quality healthcare coverage
- 1.2. Reduce costs, improve quality of healthcare services, and ensure access to safe medical devices and drugs
- 1.3. Expand equitable access to comprehensive, community-based, innovative, and culturally-competent healthcare services while addressing social determinants of health
- 1.4. Drive the integration of behavioral health into the healthcare system to strengthen and expand access to mental health and substance use disorder treatment and recovery services for individuals and families
- 1.5. Bolster the health workforce to ensure delivery of quality services and care

PUBLIC HEALTH

Safeguard and Improve National and Global Health Conditions and Outcomes

- 2.1. Improve capabilities to predict, prevent, prepare for, respond to, and recover from emergencies, disasters and threats in the nation and across the globe
- 2.2 Protect individuals, families, and communities from infectious disease and non-communicable disease through development and equitable delivery of effective, innovative, readily available, diagnostics, treatments, therapeutics, medical devices, and vaccines
- 2.3. Enhance promotion of healthy lifestyle behaviors to reduce occurrence and disparities in preventable injury, illness, and death
- 2.4 Mitigate the impacts of environmental factors, including climate change, on health outcomes

HUMAN SERVICES

Strengthen Social Well-being, Equity, and Economic Resilience

- 3.1. Provide effective and innovative pathways leading to equitable economic success for all individuals and families
- 3.2. Strengthen early childhood development and expand opportunities to help children and youth thrive equitably within their families and communities
- 3.3. Expand access to highquality services and resources for older adults and people with disabilities, and their caregivers to support increased independence and quality of life
- 3.4. Increase safeguards to empower families and communities to prevent and respond to neglect, abuse and violence, while supporting those who have experienced trauma or violence

RESEARCH & EVIDENCE

Restore Trust and Accelerate Advancements in Science and Research for All

- 4.1. Improve the design, delivery, and outcomes of HHS programs by prioritizing science, evidence and inclusion
- 4.2. Invest in the research enterprise and the scientific workforce to maintain leadership in the development of innovations that broaden our understanding of disease, health care, public health, and human services resulting in more effective interventions, treatments, and programs
- 4.3. Strengthen surveillance, epidemiology, and laboratory capacity to understand and equitably address diseases and conditions
- 4.4. Improve data collection, use, and evaluation to increase evidence-based knowledge that leads to better health outcomes, reduced health disparities, and improved social wellbeing, equity, and economic resilience

MANAGEMENT

Advance Strategic Management to Build Trust, Transparency, and Accountability

- 5.1. Promote effective enterprise governance to ensure programmatic goals are met equitably and transparently across all management practices
- 5.2. Sustain strong financial stewardship of HHS resources to foster prudent use of resources, accountability, and public trust
- 5.3. Uphold effective and innovative human capital resource management resulting in an engaged, diverse workforce with the skills and competencies to accomplish the HHS mission
- 5.4. Ensure the security of HHS facilities, technology, data and information, while advancing environment-friendly practices

Six Things to Know: Draft HHS Strategic Plan FY 2022–2026

- 1. More inclusive of the nation's diversity and puts equity at the center of achieving the Department's approaches to achieving the HHS mission.
- 2. Focus on integrating behavioral health to expand access to mental health and substance use disorder services into our healthcare systems (Goal 1)
- 3. Emphasis on equitable prevention, preparedness, response, and recovery efforts to address emergencies, disasters, and climate change in all communities (Goal 2)
- 4. Expanded focus on neglect, abuse, and violence, and helping those who have experienced trauma or violence (Goal 3)
- 5. Affirms upholding scientific integrity to promote public trust and the importance of research (Goal 4)
- 6. Builds evidence, strengthens evaluation, and applies lessons learned in all the Plan's Goals, not just the Research & Evidence Goal



Guiding Questions to Consider in Providing Feedback on the Draft HHS Strategic Plan FY 2022–2026 What objectives do you find most important to your communities and how could we strengthen them further in the Strategic Plan?

Where do you think issues important to American Indian and Alaska Native Tribes can be strengthened in the draft Strategic Plan?

Are there any broad concerns, questions, or suggestions for the draft HHS Strategic Plan FY 2022–2026?



How To Submit Feedback and Comments

Navigating the Draft HHS Strategic Plan



The Draft HHS Strategic Plan FY 2022–2026 can be accessed here: https://www.hhs.gov/about/draft-strategic-plan/index.html

When you click on a Strategic Goal, you will see the following sections:

- Objectives
- Related Executive Orders, White House Action Plans, Directives, and Memoranda
- Contributing Divisions

When you click on an Objective, you will see the following sections:

- Introduction
- Contributing Divisions
- Strategy Themes and Supporting Strategies

Navigating the Draft HHS Strategic Plan – Example

Objective 1.3: Expand equitable access to comprehensive, community-based, innovative, and culturally-competent healthcare services while addressing social determinants of health

HHS invests in strategies to expand equitable access to comprehensive, community-based, innovative, and culturally-competent healthcare services while addressing social determinants of health. HHS supports community-based healthcare services to meet the diverse healthcare needs of underserved populations while removing barriers to access to advance health equity and reduce disparities. The Department also works to understand how to best address social determinants of health in its programs. Below is a selection of strategies HHS is implementing.

In the context of HHS, this Strategic Plan adopts the definition of *underserved populations* listed in Executive Order 13985: Advancing Racial Equity and Support for Underserved Communities through the Federal Government to refer to "populations sharing a particular characteristic, as well as geographic communities, who have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life"; this definition includes individuals who belong to underserved communities that have been denied such treatment, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality. Individuals may belong to more than one underserved community and face intersecting barriers.

Contributing OpDivs and StaffDivs

ACL, AHRQ, ASPE, CDC, CMS, HRSA, IHS, NIH, SAMHSA, OASH, and OCR work to achieve this objective.

Strategies

Support community-based services to meet the diverse healthcare needs of underserved populations

- Deliver safe, affordable, accessible, quality, value-based primary healthcare to underserved populations through health centers and other community providers.
- Address COVID-19 related health disparities and advance health equity by expanding state, local, US territorial, and freely associated state health department capacity and services to improve and increase testing and contact tracing and prevent and control COVID-19 infection or transmission.
- Ensure the provision of safe, culturally-competent care and services for women, with dedicated focus on African American/Black and American Indian/Alaska Native women and people with lower incomes, during maternal, perinatal, prenatal, and postpartum periods of life, including raised awareness of pregnancy-related risk factors and available benefits.
- Work with tribal nations and Urban Indian Health programs to expand and improve pre- and postnatal care on Indian reservations and Urban Indian centers to reduce disparities in maternal and infant mortality and morbidity.

We Look Forward to Hearing from You – November 22

You can comment by email, fax, and mail.

- E-mail: HHSPlan@hhs.gov, please include the Objective Number in the subject line of your email.
- Fax: (202) 690-5882
- Mail: U.S. Department of Health and Human Services
 Office of the Assistant Secretary for Planning and Evaluation,
 Strategic Planning Team

Attn: Strategic Plan Comments 200 Independence Avenue, SW, Room 434E Washington, DC 20201



The Draft HHS Strategic Plan
FY 2022–2026 can be accessed here:
www.hhs.gov/about/draft-strategicplan/index.html

Considerations for IHS, Tribal Health Programs, and Urban Indian Organizations: Draft HHS Strategic Plan FY 2022-2026

Ms. Yvonne Davis

Acting Senior Planner

Office of Public Health Support

Indian Health Service



IHS (I/T/U) Considerations

Objective 1.2 - Engage in tribal and urban Indian organization consultation and confer on what improving quality health care services mean.

Objective 2.3 - Ensure the safe provision of safe, culturally-competent care and services for women, with dedicated focus on African American / Black and American Indian/Alaska Native women and lowincome communities, during maternal, perinatal, prenatal, and postpartum periods of life, including raised awareness of pregnancy, associated risk factors, environmental risks, and available benefits.

Objective 2.3 - Engage state level, regional, Tribal and local providers, programs, and organizations including medical practitioners, WIC Programs, Breastfeeding Coalitions and the Supplemental Nutritional Assistance Program (SNAP)—to develop cultural competence training and education materials for health care providers who provide services to vulnerable, low-income, high-risk, maternal, perinatal, and postpartum populations.

Objective 3.3 - Coordinate across federal agencies and collaborate with state, local, Tribal, private, and non- profit partners to ensure sufficient availability and equitable distribution, and equity in access to evidence-based interventions that prevent onset of symptoms and/or improve management to people diagnosed with multiple chronic conditions.

Objective 3.4 - Increase safeguards to empower families and communities to prevent and respond to neglect, abuse, and violence, while supporting those who have experienced trauma or violence

Objective 4.4 - Increase data interoperability between federal partners, States, Tribes, non-profit organizations, and health information exchange networks to facilitate shared understanding, application, and utility.

Objective 4.4 - Collaborate and coordinate with other HHS Divisions and USG department, State, Tribal Health Facilities, Urban Indian Organizations, and partner Subject Matter Expert steering committees to improve AI/AN health care and status data collection to improve AI/AN health care and status data collection by identifying and sharing best practices to enhance the quality and quantity of AI/AN federal health information system data, including the expansion of social well-being, equity, economic resilience, and population comparison data.

 Combine the meaning of healthcare costs and medical costs under the term Healthcare Costs.

Define Primary Health Care Providers

Define Local Organizations

Tribal Leader and Urban Indian Organization Leader Discussion

•Next Call: Thursday, December 9 at 3:00 PM – 4:00 PM

•IHS Event Calendar: https://www.ihs.gov/ihscalendar/

