



Indian Health Service Press Release

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FOR IMMEDIATE RELEASE
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IHS Rapid City Service Unit Transfer to the Tribally-Managed Oyate Health Center

Beginning February 26, 2022, all health care services provided at the IHS Rapid City Service Unit will transfer to the Oyate Health Center, a tribally-managed clinic in South Dakota operated by the Great Plains Tribal Leaders Health Board.

“We welcome this opportunity to participate in the transition from federal to tribal program operations on behalf of IHS beneficiaries in the Rapid City Area.” said IHS Acting Deputy Director Elizabeth Fowler. “We are confident the Oyate Health Center will continue to provide excellent health care to patients throughout the Great Plains Area.”

The Rapid City Service Unit primarily serves three tribes: the Cheyenne River Sioux Tribe, the Oglala Sioux Tribe, and the Rosebud Sioux Tribe. In 2019, the IHS and the Great Plains Tribal Leaders Health Board entered into an agreement for the health board, on behalf of the Cheyenne River Sioux Tribe and the Oglala Sioux Tribe, to assume the tribes’ portion of the programs, functions, services, and activities at the Rapid City Service Unit, under Title I of the Indian Self-Determination and Education Assistance Act.

The health board has operated the two tribe’s programs at the Oyate Health Center, while the IHS provided direct health services using the Rosebud Sioux Tribe’s tribal shares funding. In November 2021, the Rosebud Sioux tribe authorized the health board to contract on its behalf, and the health board will now assume operations of the IHS facility and its health care services. IHS will provide funding to the health board through its Indian Self-Determination and Education Assistance Act agreement.

The Oyate Health Center will provide comprehensive primary care, specialty services, and community-based services for the Rapid City Service Unit. Ambulatory care services and referral services will also be provided to enhance the delivery of primary health care in the areas of health promotion and disease prevention.

“We remain committed to providing access to quality health care for American Indians and Alaska Natives in the Great Plains Area,” said IHS Great Plains Area Acting Director Capt. Brent Rohlfs, P.E. “We

will continue to work with the Great Plains Tribal Leaders Health Board to provide a smooth transition for all patients.”

Patients who require care beyond the capabilities of the Rapid City Service Unit will be referred to outside providers. Patients in need of emergency services will be transferred to the Monument Health Rapid City Hospital, which is approximately four miles away.

The IHS recognizes that tribal leaders and members are in the best position to understand the health care needs and priorities of their communities. Today, over 60 percent of the IHS appropriation is administered by tribes, primarily through ISDEAA self-determination contracts or self-governance compacts. The number of success stories grows each year, and the IHS supports this success by offering information, technical assistance, and policy coordination.

The IHS, an agency in the [U.S. Department of Health and Human Services](#), provides a comprehensive health service delivery system for approximately 2.6 million American Indians and Alaska Natives who belong to [574 federally recognized tribes](#) in 37 states. Follow the agency via social media on [Facebook](#), [Twitter](#), and [LinkedIn](#).

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