

**Nashville Area
Direct Service Tribes Advisory Committee
FY2022 1st Quarter Report
JULY - SEPT 2021**

Area Tribal Representatives: Chief William Harris, Catawba Indian Nation Chief Stephen Adkins, Chickahominy Indian Tribe	Federal Liaison: Dr. Vickie Claymore, NAO Field Operations Ashley Metcalf, NAO Office of Tribal Affairs
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Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people

The final INNOVA study, conducted for the Mid-Atlantic Service Unit (MASU), provided an information foundation for planning for direct care. The Service Unit continues to actively engage in the establishment of two tribal health centers, the deployment of three mobile health units, and the establishment of four health stations in the tribal communities. A significant milestone was reached this past quarter with the award of the construction contract for the Monacan Health Center. Groundbreaking is expected to be the middle of October with completion at the end of the calendar year 2022. Additionally, the architectural firm is putting the final touches on the design for the Mid-Atlantic Tribal Health Center, that project is expected to go out for bid in November of 2021. This quarter saw many other accomplishments for the MASU, including establishing a Medical Executive Committee and adopted Governing Board by-laws. Over 300 administrative policies were also submitted for adoption. Programs have been implemented, purchased, and in some cases developed, to manage electronic health records. In various stages of implementation, these include the Resource and Patient Management System (RPMS), Electronic Health Records (EHR), Dentrix, ICare, and Vista Imaging. This quarter Purchased/Referred Care (PRC) Technician, Driver, and Community Health Technician positions were filled. Final offers were extended and accepted for a supervisory physician and psychologist. A supervisory dentist candidate was chosen and is awaiting final adjudication. The MASU also continues work to ensure continuous reviews of pending claims and resource management; a review of all pending claims and communication with the providers resulted in clearing claims for processing as well as saving just under \$96,000 in encumbered lapsing funds.

Catawba Service Unit (CSU) on boarded a Pharmacist and made a selection for a new Health Technician this quarter. The CSU brought on a new temporary Nurse Practitioner as well. The CSU's PHN/Diabetes Coordinator facilitated a monthly Podiatry Clinic (July through September). At this clinic, patients with diabetes are seen by a Podiatrist and can receive a comprehensive foot exam, routine foot care, an evaluation for therapeutic footwear, and other important services. During these clinics, 33 patients were seen, 10 pairs of therapeutic footwear and inserts were distributed, 4 immunizations were given, and 1 lab was drawn. The CSU's PHN/Diabetes Coordinator and Community Health Nurse taught various classes and composed videos throughout this quarter including: *seven well attended K-5 summer camp classes; videos made to be shared on the Catawba Nation Senior's Facebook page; Tobacco Awareness video; partnership with the Catawba Wellness Department hosting Catawba Cooking Contest, along with many other quality community programs.* The CSU submitted the 2022 Special Diabetes Program for Indians (SDPI) Continuation Grant Application for funding to support our diabetes program at CSU. Funding from the SDPI helps make CSU's Podiatry Clinic, Optometry Clinic, and other important services possible.

The Mashpee Service Unit provided weekend Flu Clinic on 9/25/21 19 flu shots were provided to community members along with patient education on good health habits and importance of being vaccinated.

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The Shinnecock Service Unit (SSU) has been working to expand Behavioral Health Services at Shinnecock. A solicitation for a contract to provide increased Counseling and Psychiatry services was issued and is expected to go to contract in October. This project will include the development of a strategy to increase cooperation and collaboration between the various tribal, private and governmental BH programs and services at Shinnecock. In addition to a BH contract, we have been working directly with providers to increase access to services through Rate Quote Agreements (RQA). This includes the completion of an updated RQA with Seaford Center and Seaford Services for both in-patient and outpatient services. A similar agreement is being considered with the Phoenix House system. Additionally, to further expand and enhance services available to the Shinnecock Community, solicitations for contracts to expand Vision Care Services and provide access to Durable Medical Equipment are also being offered. We plan to have FY2022 contracts in place for these services in October.

Unity Healing Center (UHC), the Area's Youth Regional Treatment Center, focused on evaluating admission process to increase efficiency and timeframe for approval this quarter. This process included reviewing policies and procedures for admissions. UHC team revised the application and supporting documents with a goal of streamlining information to support a 2 week timeframe for admission review. The team also continued evaluate webpage and access items to update and provide additional information. UHC collaborated with other YRTC's regarding webpage and admission process. The goal is to have a streamlined admission process with program information available on the webpage <https://www.ihc.gov/nashville/healthcarefacilities/unity/>. The UHC team continued outreach to the Nashville area to provide program information. This included phone calls and emails to referring agencies as well as an updated program brochure with an overview of services. Future activities such as virtual meet and greet/listening sessions will be evaluated.

The Lockport Service Unit continued The Niagara Falls Memorial Hospital COVID-19 funding agreement for Tuscarora Nation by implementing the option year for 2022. The agreement is for Behavioral Health services, COVID testing and supplies.

Four participants of the Nashville Area Business Office attended the CMS Coding Certification Book Camp Training. The training objective was to educate and prepare participants to take the AAPC Coding Exam, to build a skillset of CMS guidelines and regulations of medical record documentation of patient services.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

The Catawba Service Unit was surveyed through Accreditation Association for Ambulatory Health Care (AAAHC) on September 23-24, 2021. The Survey went well and the CSU is waiting on official word of accreditation and their Medical and Dental Home certificates. The SU completed a Consolidated Mail Outpatient Pharmacy (CMOP) quality assurance project to identify patients temporarily enrolled in CMOP due to COVID-19 response efforts, as previously anticipated, many of these patients became permanent CMOP patients. Currently, 346 patients are enrolled in CMOP.

The Shinnecock Service Unit completed the review of the annual PRC Audit, including findings and the plan to address areas in need of improvement. The PRC Officer and Area PRC team met with staff of the SSU to conduct and discuss this review. The SSU also complete reconfiguration of office space in

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August allowing the Nurse Case Manager an office that provides both patient privacy and required social distancing. The Service Unit now consists of three offices in 336 square feet. Additionally the SSU deployed 50 telehealth kits in the Shinnecock Community this quarter. Vital sign data is being collected as we continue our outreach to deploy all 100 units. The Consultant, Vital Care Services, provided workshops for Shinnecock Clinic and Senior's Program staff who were instrumental in identifying participants and implementing distribution. An on-site deployment event was conducted at the Seniors Luncheon in August. Each unit contains a weight scale, blood pressure monitor, digital or touchless thermometer, pulse oximeter and Bluetooth enabled tablet. The significance of this program's at-home data collection was validated when two patients were referred to the hospital emergency room. While not admitted for hospitalization, home monitoring lead to ER interventions that prevented imminent serious harm.

Lockport Service Unit engaged in Tribal consultation with the Tuscarora representatives on July 27, 2021 to discuss healthcare service delivery options and increase collaboration between the Tuscarora Nation and IHS.

This quarter the Nashville Area conducted a virtual session for open discussions on available Healthcare Services for the Onondaga, Tonawanda and Tuscarora Nations. Specific topics included services not currently funded/authorized through the American Indian Heath Programs in New York State, PRC eligibility (Six Nations Tuscarora), and expanded services made available through PRC contracted vendors.

Unity Healing Center (UHC) completed an additional Environmental Survey with Nashville Area Office in August. This survey focused on kitchen compliance and staff trainings for Blood Borne Pathogens, Hazard Communications, and Food Safety. UHC completed a mock survey with Joint Commission consultants in September. This was a two-day survey with one general consultant and one Environment of Care consultant. This supported our continued focus on facility safety and preparation for Joint Commission survey in near future.

Goal 3: To strengthen IHS program management and operations

Mid-Atlantic Service Unit's proposed organizational chart was approved by the Governing Board this quarter. Great effort was made to assure not only a progression within positions was available, but that steps in a career path were recognized, as well. This quarter, the MASU CEO met with subject matter experts in primary care, behavioral health and laboratory technology to consider services rendered in both the mobile units as well as the health center.

The Nashville Business Office (BO) offered business office management report training. This training was successfully completed with management staff from Lockport, Mashpee, Catawba and Mid-Atlantic Service Unit. The training consist of a review and demonstration of weekly, monthly, quarterly and semi-annual reports to generation to monitor all components that within the revenue cycle. The Nashville BO continues its role to increase third party revenue for the Nashville Area facilities with configuration of Mid Atlantic Service Units third party and accounts receivable package for implementation of direct care service reimbursement. The BO Manager joined Mid Atlantic Service

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Unit, CEO on calls with the State of Virginia to complete Medicaid enrollment and discuss All Inclusive Reimbursement Rate reimbursement for patients multiple same day visits. Discussions also have been enter in with the state of Massachusetts, with North Carolina, South Carolina and New York to follow.

The Shinnecock Service Unit focused on ensuring adequate records management this quarter, meeting with the Area Records Management Officer for training and technical assistance. Monthly training was conducted and attended by the Records Liaison for the Service Unit. In addition, the PRCO followed up with the SU in a special session on and additional collaborative technical assistance session with the Area Records Management Officer.

Unity Healing Center (UHC) Governing Board approved by-laws specifically for the governing board. This defined roles and responsibilities of the board. Additionally, UHC continues to strengthen the Professional Staff Organization (PSO) within the service unit program. This will allow for additional reviews of professional and allied staff. During this quarter, UHC evaluated the need to maintain a local PSO or join the Nashville Area Medical Staff Committee.

The Lockport Service Unit staff attended AAAHC training to begin preparing the application for accreditation for Dental and Behavioral Health Service.

The Catastrophic Health Emergency Fund is established to support and supplement Purchased/Referred Care (PRC) programs that experience extraordinary medical costs above \$25,000. The Nashville Area Office FY 21 PRC Federal programs have received reimbursements in the amount of \$150,097.00 with a pending amount of \$186,692.00 awaiting HQ approval for disbursement of funds.

The Nashville Area Federal facilities FY21 third party revenue for totaled \$1,684,898.56. This is an overall increase by 20% in comparison to FY20. The Nashville Area has exceeded its goal by 8%, with Medicaid remaining the top payer. A FY22 third party projection goal will be established following full review and analysis of FY21 data to include but not limited to; patient volume, third party eligibility counts, visit volume, collections, billed, adjustments and facility staffing.