

Indian Health Service Rockville MD 20852

SEP 2 3 2002

Dear Tribal Leader:

I invite your review and comments on "Transitions 2002: A 5-Year Initiative for Restructuring Indian Health." This report was prepared for the Indian Health Service (IHS) by the Restructuring Initiative Workgroup (RIW), a constituent-dominated group of 20 Indian health leaders: Tribal Leaders, representatives of Tribal and urban Indian health programs and national Indian organizations, and IHS employees. I am distributing the RIW report throughout Indian Country to obtain your views on this important report.

Since the RIW released its interim report in June 2002, the Workgroup has continued exploring options for the design of the Indian health care system. Building on the interim report, the final report includes additional recommendations to address lingering American Indian and Alaska Native health disparities. One such recommendation calls for the creation of a new balance among treatment and rehabilitation, disease prevention, and public health programs. To improve performance and prepare for the next 5-7 years, the report considers changes to the IHS work force, facilities, technological infrastructure, and administrative support services. A key principle is to use any savings that result from the proposed reforms to expand health care services to Indian people. The report identifies options to regionalize some administrative services, streamline facilities design and construction, augment information technology infrastructure, incorporate successful business practices, and assist Tribes, the IHS, and urban Indian health projects to augment resources for Indian health care from other Federal agencies.

In keeping with the IHS policy of Tribal consultation and participation, I have requested that each IHS Area Director, working in collaboration with Tribal Leaders in the Area, schedule a consultation meeting on the RIW final report within the month of October. Area Directors and their key staff will meet with Tribal Leaders and/or their representatives to review and comment on recommendations in the RIW final report. The feedback from Area consultation sessions is due to me by November 1. In addition to the Area Director's feedback, Tribes, Indian health organizations, and individuals may submit comments to me on their own, also by November 1.

I want to reiterate the Agency's commitment to consultation. Before adopting any recommendation that significantly affects the Indian health system, representative views from Indian Country will be considered. We are completely committed to working collaboratively with Tribes, Indian health organizations, and the American Indian and Alaska Native people to advance their health to the highest level possible.

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Your time and diligent efforts have been critical to the strides we have made together toward improving of the health status of American Indian and Alaska Native people. I anticipate that our work together through consultation and collaboration will augment this progress.

Sincerely yours,

Charles W. Grim, D.D.S., M.H.S.A.

Assistant Surgeon General

Interim Director

Enclosure