



OVERVIEW

Alaska Native 2006 User Population.

ALASKA AREA TOTAL	130,682
Anchorage Service Area	52,417
Annette Island Service Area	1,331
Barrow Service Area	4,389
Bristol Bay Area Service Area	5,295
Interior Service Area	12,981
Kotzebue Service Area	7,630
Mt. Edgecumbe Service Area	15,019
Norton Sound Service Area	7,406
Yukon-Kuskokwim Service Area	24,214

Users are defined as beneficiaries who used an Indian Health Service or tribal facility that reports through the IHS data system at least once between 10/1/2003 and 9/30/2006. User population by tribal health organization are listed at the beginning of the service area chapters.

Native People of Alaska. *The Eskimos.* More than half of all Alaska Natives are Eskimo. The two main Eskimo groups, Inupiat and Yupik, differ in their language and geography. The former live in the north and northwest parts of Alaska and speak Inupiaq; the latter live in southwest Alaska and speak Yupik. Few Eskimos can still speak their traditional Inupiaq or Yupik language as well as English. Along the northern coast of Alaska, Eskimos are hunters of the bowhead and beluga whales, walrus and seal. In northwest Alaska, Eskimos live along the rivers that flow into the area of Kotzebue Sound. Here, they rely less on sea mammals and more upon land animals and river fishing. Most southern Eskimos live along the rivers flowing into the Bering Sea and along the Bering Sea Coast from Norton Sound to the Bristol Bay region.

The Aleuts. Most Aleuts originally lived in coastal villages from Kodiak to the farthest Aleutian Island of Attu. They spoke three distinct dialects, which were remotely related to the Eskimo language. When the Russians came to the Aleutian Islands in the 1740s, Aleuts inhabited almost every island in the chain. Now, only a few islands have permanent Aleut villages. Severe and unpredictable weather conditions in the Aleutian Islands make transportation both expensive and time-consuming. The region is dependent on the fishing industry, which is variable from year to year.

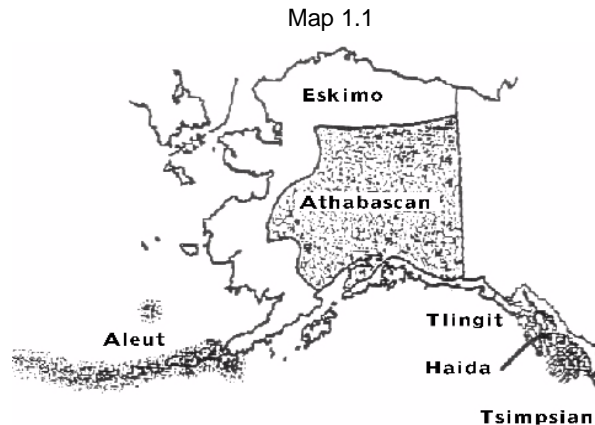
The Interior Indians. The Athabascans inhabit a large area of Central and Southcentral Alaska. They may have been the first wave of Natives to cross the land bridge over 15,000 years ago. Although their language is distinct, they may be linguistically related to the Navajo and Apaches of the Southwest U.S. There are eight Athabascan groups in Alaska. Characteristics of all eight groups include similar language, customs and beliefs.

Alaska Area



The Southeast Alaska Indians. The three major Indian tribes inhabiting Southeast Alaska are the Tsimpsians, Haidas, and Tlingits. The community of Sitka in Southeast Alaska was the capitol of Russian America, and the community of Juneau is now the capitol city of the State of Alaska.

Environmental Factors. Alaska encompasses one-fifth of the total land mass of the United States. Within its 586,000 square miles, Alaska has diverse climates including deserts, plains, swamps, forests, glaciers, ice fields, fjords, river systems, volcanoes, thousands of islands and six major mountain ranges. With two oceans and three major seas, Alaska has as many miles of sea coast as the combined Atlantic and Pacific seaboards.



Most communities in Alaska are separated by vast distances. Anchorage is 1,445 miles from Seattle, WA - the nearest metropolitan center. Vast mountain ranges, stretches of tundra, glaciers, impassable river systems, and open waters separate communities within the state. The distance from many communities to the nearest medical facility is equivalent to the distance from New York to Chicago.

The State of Alaska is one congressional district. Don Young (R) is Alaska's U.S. Congressman, Ted Stevens (R) and Lisa Murkowski (R) represent Alaska in the United States senate.

Utilities. Communities in Alaska are often small in population and separated by great distances, vast mountain ranges, oceans and major river systems. Because of these characteristics, utilities in most settlements serve only that community. Common water supplies and waste disposal systems that exist in other states are more expensive and difficult to build and maintain. Alaska has the lowest proportion of homes with piped water and wastewater disposal in the United States.

Communications. Tribal health programs differ widely in their capacity to electronically access and augment patient records in the statewide data system. Small local telephone systems have problems such as inclement weather, lack of maintenance parts, lack of trained personnel, geographic barriers and distances involved. Long distance carriers in a few parts of the state need to update their infrastructure (such as satellite earth stations) to make the transmission of digital images possible. Tribal health administrators estimate that over 90% of private residences have telephone service, and some estimate in excess of 95%.

The Alaska Native Tribal Health Consortium designed and built equipment that allows Community Health Aides/Practitioners (CHA/Ps) to create and send digital images for medical consultation. The Alaska Federal Health Care Partnership sponsors the project which supplies over 200 workstations, or carts, to remote Alaska health care sites. The carts are supplied with a digital otoscope for inner ear images, an EKG to measure heart activity, a digital camera, and a scanner. Multiple images can be sent through a network to the Alaska Native Medical Center (ANMC), or to other health care providers in the partnership.



Transportation. According to the Alaska Department of Transportation, Alaska has 13,323 miles of roads and 2,229 ferry miles for a total of 15,552 miles. About 80% of Alaska Native villages are not linked by a road system. More than one-half of the people served by the Alaska Native tribal health organizations live in rural and remote locations. Fuel, building materials, furniture and many other supplies can be delivered to coastal and river communities by barge only during the summer months. Air freight, patient transportation and distance make health care costs high and difficult to predict.

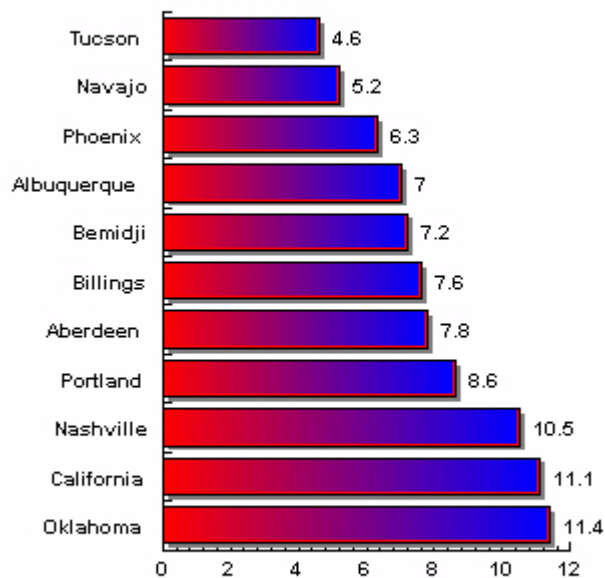
Housing. Housing varies greatly throughout the State of Alaska. In Anchorage, Fairbanks, Juneau and other major population centers, residential areas have streets, utilities, fire protection and other modern conveniences. In contrast, most of the rural communities lack the infrastructure and economy necessary to finance roads, adequate utilities, housing and fire protection.

Education. Anchorage and Fairbanks are regional centers for the University of Alaska. Other UA campus locations are: Tanana Valley, Chukchi, Northwest, Kuskokwim, Bristol Bay, Kodiak, Kenai Peninsula, Chugiak-Eagle River, Matanuska-Susitna, Prince William Sound, Ketchikan, Sitka, Juneau, Interior, and Aleutians.

There are 481 elementary and high schools in Alaska. Schools in the smaller villages serve all students K-12, and can not be defined as elementary, middle or high school.

Graph 1.1

American Indians/Alaska Natives Percent Bachelor's Degree or Higher Age 25 and Older 1990 Census State-Level Indian Data



Includes data for 35 Reservation States (South Carolina and Indians were added as Reservation States in 1994 and 1995 (respectively). Source: DHHS, IHS, OPH, DCEH Program Statistics Team. Regional Differences in Indian Health 1997.

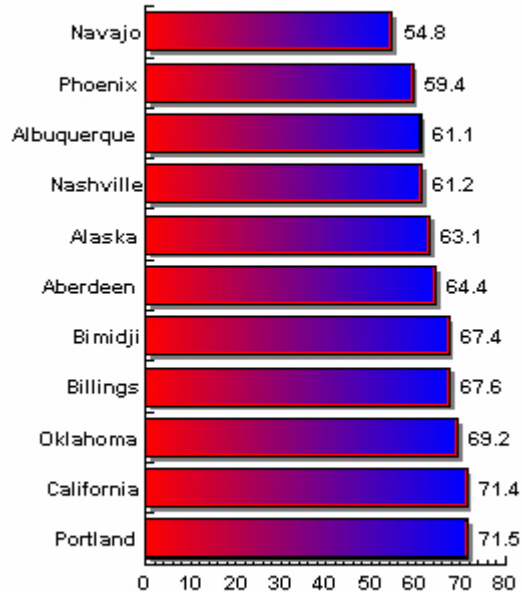


Natural Resources. Alaska has the largest energy potential of any state and most countries in the world. These energy assets include coal, gas, geothermal, hydroelectric, oil, solar and wind. Also, 30 of the 32 minerals considered essential to the United States exist in commercial scale deposits in Alaska. Important renewable resources in the state are timber, seafood, and agricultural products. Developing these natural resources while protecting wilderness habitat is a challenge that will face future generations of Alaskans.

Employment. Rural employment opportunities are limited for American Indians/Alaska Natives (AI/AN) because the job market is limited in remote parts of the state. The unemployment rate for rural bush communities is twice as high as the urban areas of the State. In areas where fishing is the form of employment, work becomes seasonal. Natives who reside in rural communities rely on subsistence hunting and fishing and seasonal employment.

Graph 1.2

**American Indians/Alaska Natives
Percent High School Graduate or Higher
Age 25 and Older, 1990 Census State-level**



Includes data for 26 Reservation States (South Carolina and Indian States were added as Reservation States in 1984 and 1986 respectively).
Source: DHHS, IHS, OPH, OCEH Program Statistics Team. Regional Differences in Indian Health 2000-2001.

Table 1.1

**Race and Sex by Employment Status
(persons 16 years and over)**

	Employed	Unemployed	Not in Workforce	Percent Unemployed or Not in Workforce
White 1/ Male	116,738	10,056	36,098	28%
White 1/ Female	98,831	5,977	50,903	37%
AI/AN 2/ Male	13,903	4,564	12,597	55%
AI/AN 2/ Female	15,679	2,907	14,080	52%

1/ Individuals who identified themselves as White alone, not in combination with another race.
2/ Individuals who identified themselves as American Indian/Alaska Native (AI/AN) alone, not in combination with another race.
Source: U.S. Census Bureau, Census 2000 Summary File 3.



Table 1.2

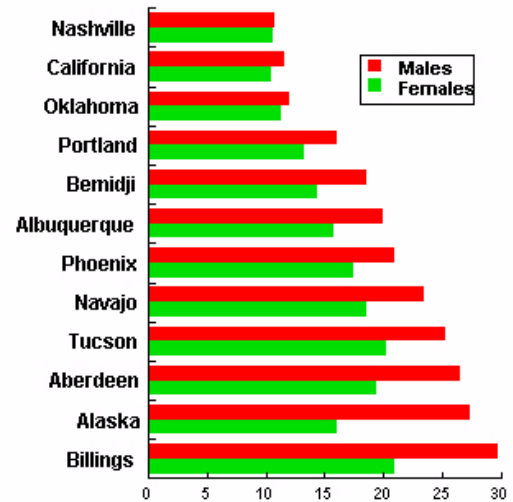
Alaska All Races Per Capita Income by Area 2003

	Capita Income
State of Alaska	33,213
Aleutians East Borough	24,522
Aleutians West Census Area	25,885
Municipality of Anchorage	37,750
Bethel Census Area	22,883
Bristol Bay Borough	40,769
Denali Borough	39,497
Dillingham Census Area	28,485
Dillingham Census Area	30,583
Fairbanks North Star Borough	28,485
Fairbanks North Star Borough	35,542
Haines Borough	36,668
City and Borough of Juneau	29,362
Kenai Peninsula Borough	38,343
Ketchikan Gateway Borough	29,479
Kodiak Island Borough	22,697
Lake and Peninsula Borough	29,483
Matanuska-Susitna Borough	24,774
Nome Census Borough	36,613
North Slope Borough	24,425
Northwest Arctic Borough	21,492
Prince of Wales-Outer Ketchikan Census Area	31,467
City and Borough of Sitka	34,508
Skagway-Hoonah-Angoon Census Area	28,404
Southeast Fairbanks Census Area	33,321
Valdez-Cordova Census Area	15,748
Wade Hampton Census Area	31,861
Wrangell-Petersburg Census Area	31,352
City and Borough of Yakutat	22,907
Yukon-Koyukuk Census Area	

Source: U.S. Department of Commerce, Bureau of Economic Analysis, *State of Alaska, Alaska Department of Labor and Workforce Development, Alaska Economic Trends*, November 2006, p.7.

Graph 1.3

Percent of Males & Females Unemployed 1990 Census State-Level American Indian/Alaska Native Data



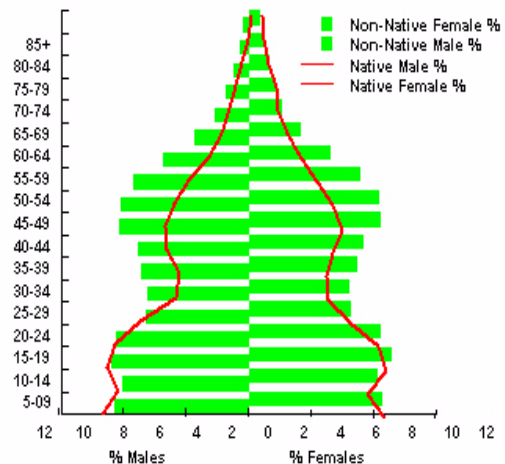
For ages 16 and older. Includes data for 35 Reservation States (South Carolina and Indiana were added as Reservation States in 1994 and 1995. Source: DHHS, IHS, OPH, DCEH, Program Statistics Team. *Regional Differences in Indian Health 2000-2001*, p.27.

Age Factors. The median age of Alaska Natives is 24.2 years, compared to a median age of 34.1 years for all Alaskans.

DESCRIPTION OF HEALTH CARE DELIVERY SYSTEM/ALASKA AREA MAPS

The **Alaska Area Native Health Service (AANHS)** is located on the ANMC campus in Anchorage. With a staff of 38 individuals, the AANHS oversees one P.L. 93-638, Title V compact with 22 funding agreements, and eighteen P.L. 93-638, Title I funding contracts. The Alaska Area transfers about \$480 million in Title V funds and \$13 million in Title I funds from the Indian Health Service (IHS) to the Alaska tribes and tribal health organizations each year.

Graph 1.4
Alaska Population Estimates Modified Age, Race & Sex 2004



NOTE: The Modified Age Race Sex (MARS) data corrects for errors in reporting of age, race and sex on statistics as accurate as possible. American Indian/Alaska Native alone or in combination with one or more of the other five race categories. SOURCE: State of Alaska, Alaska Department of Labor & Workforce Development, Research and Analysis.



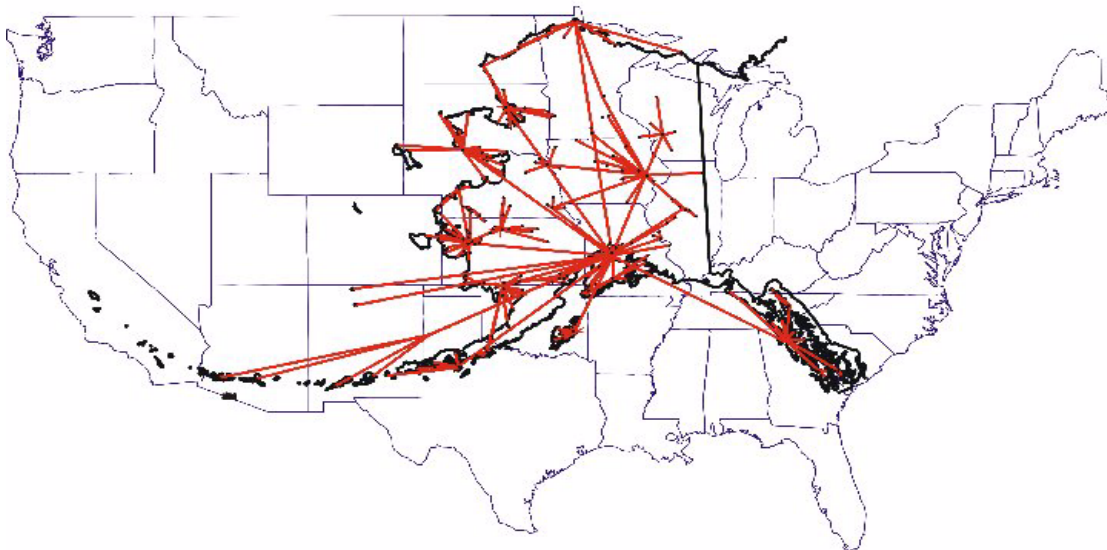
Overall, about 99% of the IHS budget allocation in Alaska is managed by tribes. As one of the twelve IHS Area Offices, the AANHS enables Alaska tribes to take advantage of the federal prime vendor contract for pharmaceutical purchases. The AANHS is a co-signer on federal contracts between Alaska tribes and private itinerant health care providers, and between Alaska tribes and other federal agencies. The AANHS manages about 345 Intergovernmental Personnel Agreements (IPAs) for federal civil service employees assigned to tribes, and about 320 Mutual Operating Agreements (MOAs) for Public Health Service Commissioned Corps officers assigned to tribes. There are no Indian Health Service direct health care services in Alaska, however, the Indian Health Service has ownership of nine tribal health care facilities in Alaska, and is responsible for their maintenance.

The Alaska Tribal Health System manages seven hospitals, 36 health centers and 166 village clinics throughout the State of Alaska. Private hospitals and practitioners supplement Native health care in urban centers.

Alaska Native Medical Center (ANMC). Located geographically within the boundaries of Southcentral Foundation tribe, ANMC operates as the “gatekeeper” for most of the specialty care required by Alaska Natives in all parts of the State. ANMC is managed by two tribal health organizations. The Alaska Native Tribal Health Consortium (ANTHC) operates the secondary and tertiary services and the Southcentral Foundation (SCF) operates the primary care services.

Map 1.2

The Alaska Native Health Care System Referral Pattern Same Scale Comparison - Alaska Area to Lower 48 States



The Alaska Native Tribal Health Consortium (ANTHC) was formed in December 1997 when federal programs, services, functions and activities previously under the Indian Health Service

Alaska Area



were transferred to Alaska tribes who became owner-consumers of health care. Virtually all statewide Native health services are connected in some manner to the activities of the ANTHC.

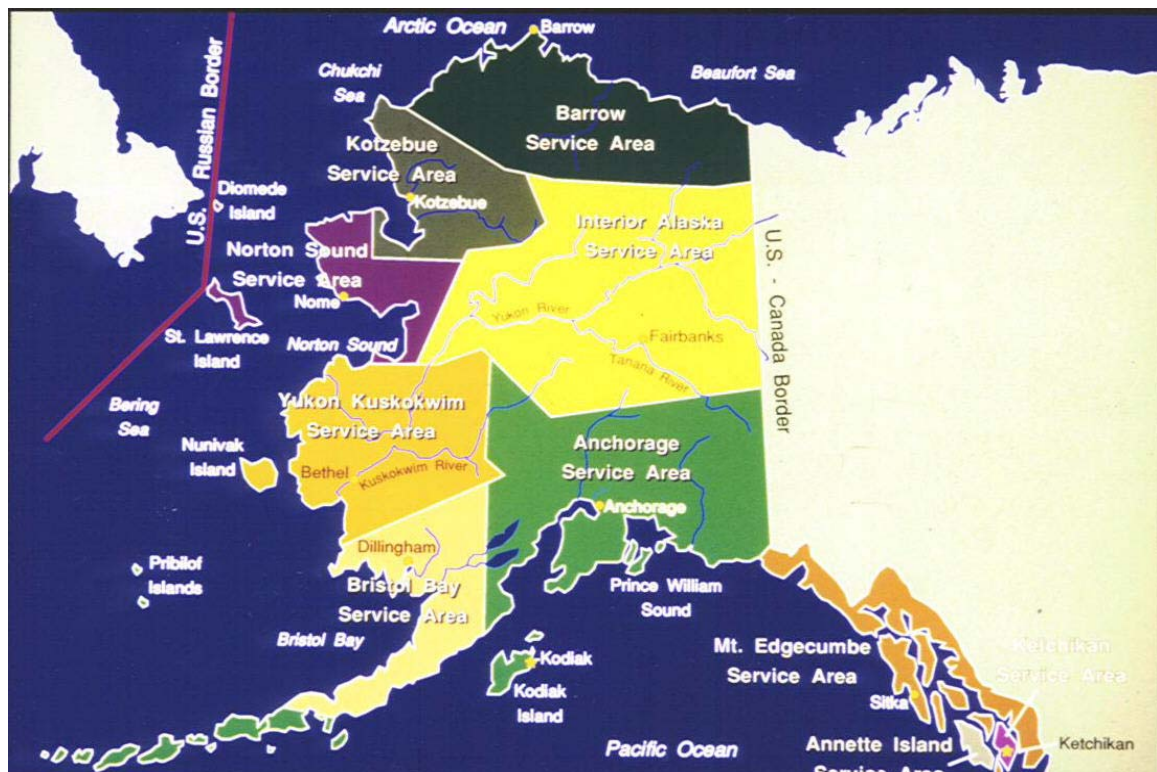
The ANTHC Division of Environmental Health and Engineering (DEHE) designs and constructs sanitation facilities to bring safe water and wastewater disposal improvements to rural Native communities and homes. DEHE works with tribal partners to establish health care facilities, including hospitals and remote village clinics. A community-based injury prevention program for all Alaska Natives is managed by DEHE.

ANTHC develops and presents training to village-based community health aide programs including medical, dental and behavioral health aides. The ANTHC Epidemiology Center is one of eleven tribal epidemiology centers established by the Indian Health Service to improve the health of Alaska Natives and American Indians through research.

ANTHC operates an HIV/AIDS Early Intervention Program (EIS) in Bethel, Fairbanks, Juneau and Sitka. Their clinical team in Anchorage provides HIV case management and coordination of primary care services to clients living in rural areas.

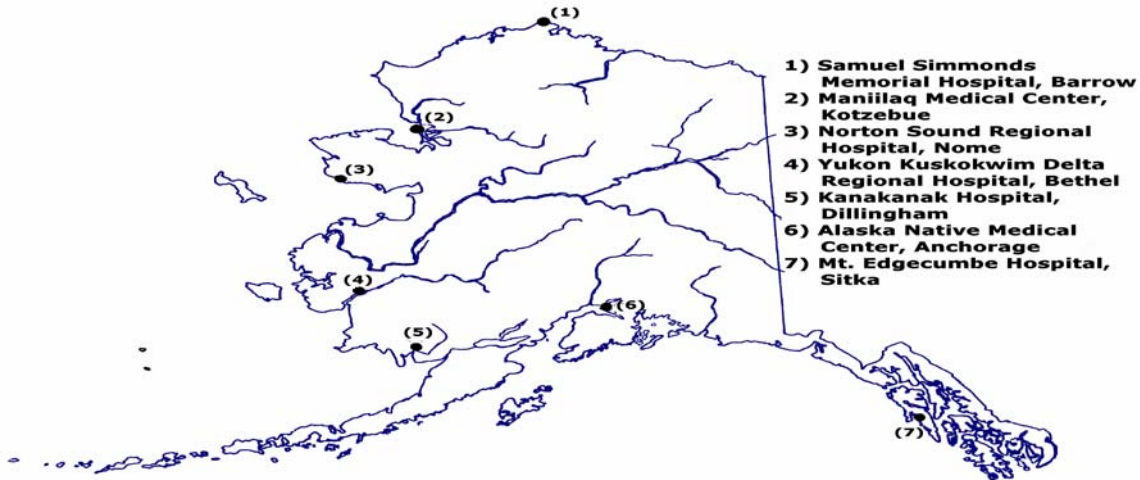
The ANTHC implements and maintains a system of electronic medical records between the state's network of health care facilities, in addition to installing and maintaining digital communications and teleradiology equipment at remote sites around the state.

Map 1.3
Alaska Area Service Area





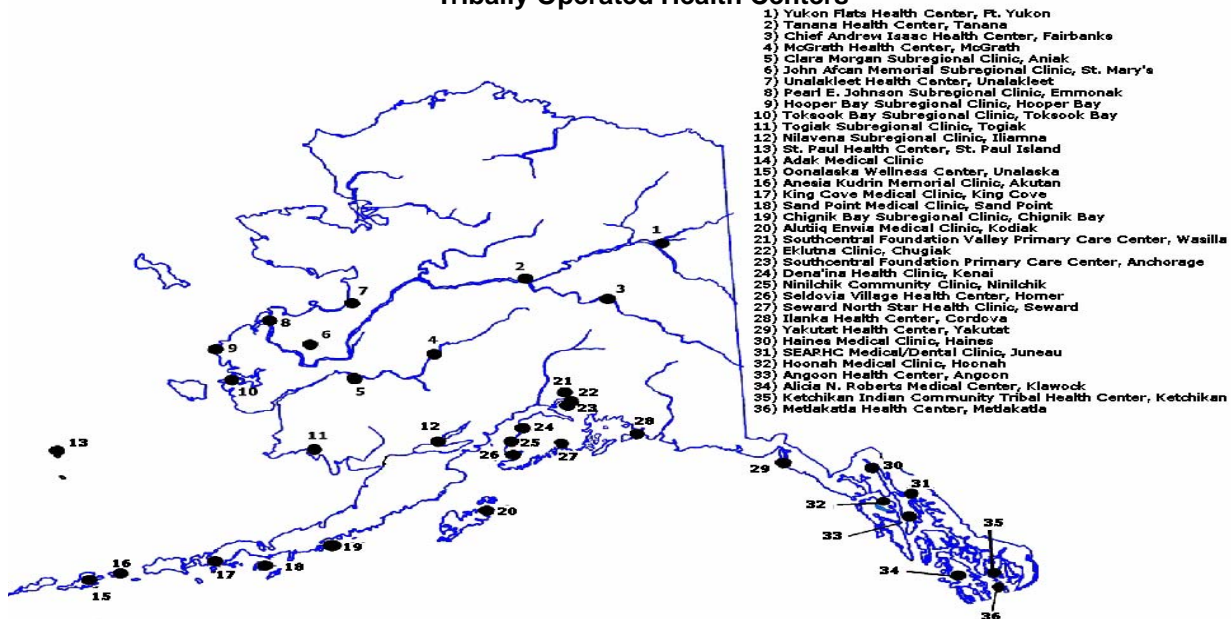
Map 1.4
Tribally Operated Hospitals



Hospital Addresses.

- Alaska Native Medical Center* - 4315 Diplomacy Drive, Anchorage, AK 99508
- Kakanak Hospital* - P.O. Box 130, Dillingham, Alaska 99576
- Maniilaq Health Center* - P.O. Box 43, Kotzebue, Alaska 99752
- Mt. Edgecumbe Hospital* - 222 Tongass Drive, Sitka, Alaska 99835
- Norton Sound Regional Hospital* - P.O. Box 966, Nome, Alaska 99762
- Samuel Simmonds Memorial Hospital* - 1296 Agvik Street, Barrow, Alaska 99723
- Yukon-Kuskokwim Delta Regional Hospital* - P.O. Box 287, Bethel, Alaska 99559

Map 1.5
Tribally Operated Health Centers





Health Center Addresses.

Adak Clinic - General Delivery, Adak, AK 99571
Akutan Clinic - P.O. Box 113, Akutan, AK 99553
Alicia N. Roberts Medical Center - P.O. Box 163, 830 Craig-Klawock Hwy, Klawock, AK 99925
Alutiiq Enwia Medical Clinic - 402 Center Avenue, Kodiak, AK 99615
Angoon Health Center - P.O. Box 27, 600 Chinook Way, Angoon, AK 99820
Aniak Subregional Clinic - P.O. Box 269, Aniak, AK 99557
Chief Andrew Isaac Health Center - 1638 Cowles Street, Fairbanks, AK 99701
Chignik Bay Sub-Regional Clinic - P.O. Box 90, Chignik, AK 99564
Dena'ina Health Clinic - 416 Frontage Road, Kenai, AK 99611
Eklutna Clinic - P.O. Box 26339 Eklutna Village Road, Chugiak, AK 99567
Emmonak Sub-Regional Clinic - General Delivery, Emmonak, AK 99581
Hooper Bay Subregional Clinic - P.O. Box 49, Hooper Bay, AK 99604
Haines Medical Clinic - P.O. Box 1549, Haines, AK 99827
Hoonah Medical Clinic - P.O. Box 103, Hoonah, AK 99829
Ilanka Health Center - P.O. Box 1388, Cordova, AK 99574
Ketchikan Indian Community Tribal Health Center - 3289 Tongass, Ketchikan, AK 99901
King Cove Clinic - P.O. Box 206, King Cove, AK 99612
Metlakatla Health Center - P.O. Box 439, Metlakatla, AK 99926
McGrath Health Center - P.O. Box 10, McGrath, AK 99627
Nilavena Subregional Clinic - P.O. Box 290, Iliamna, AK 99606
Ninilchik Community Clinic - P.O. Box 39368, Ninilchik, AK 99639
Oonalaska Wellness Center - P.O. Box 1130, Unalaska, AK 99685
St. Mary's Sub-Regional Clinic - General Delivery, St. Mary's, AK 99658
St. Paul Health Center - P.O. Box 148, St. Paul Island, AK 99660
Sand Point Clinic - P.O. Box 172, Sand Point, AK 99661
Seldovia Village Health Center - 880 E End Rd, Homer, AK 99603
Seward North Star Health Clinic - P.O. Box 1429, Seward, AK 99664
SEARHC Medical/Dental Clinic - 3245 Hospital Drive, Juneau, AK 99801
Southcentral Foundation Primary Care Center - 4320 Diplomacy Drive, Anchorage, AK 99508
Southcentral Foundation Valley Primary Care Center - 1451 E. Parks Highway, #200, Wasilla, AK 99687
Tanana Health Center - P.O. Box 130, Tanana, AK 99777
Togiak Sub-Regional Clinic - General Delivery, Togiak, AK 99678
Toksook Bay Subregional Clinic - P.O. Box 37028, Toksook Bay, AK 99637
Unalakleet Health Center - General Delivery, Unalakleet, AK 99684
Yakutat Health Center - P.O. Box 112, Yakutat, AK 99689
Yukon Flats Health Center - P.O. Box 33, Fort Yukon, AK 99740

COMMUNITY HEALTH AIDE PROGRAM (CHAP)

The principal provider of health services at the village level is the community health aide (CHA). Chosen by the village council, the CHA is responsible for giving first aid in emergencies, examining the ill, reporting their symptoms to the physician, carrying out the recommended treatment, instructing the family in giving nursing care and conducting preventive health programs in the villages. CHAs store and dispense prescription drugs with physician instructions. About 90% of the CHAP villages are accessible only by small engine aircraft. CHAs respond to medical emergencies 24 hours a day, in addition to working standard clinic hours. Itinerant health professionals make scheduled field trips to villages,



including physicians, dentists, coordinator-instructors, sanitarians, veterinarians and public health nurses, however CHAs usually work alone in the villages.

The Alaska Dental Health Aide Program has been developed as a specialty area under CHAP. Dental health aides must work under the supervision of a licensed dentist, and must be employees of the IHS, a tribe, or a tribal health organization. Their focus is on prevention, pain relief, infection relief and basic restorative services. There are four levels of dental health aide accreditation: primary dental aide, expanded function dental aide, hygienist aide, and dental therapist.

Alaska has 166 village-built clinics with about 420 CHAs. Graph 1.5 displays the CHA visits by tribal health organization for FY 2006.

State Public Health Centers & Nurses.

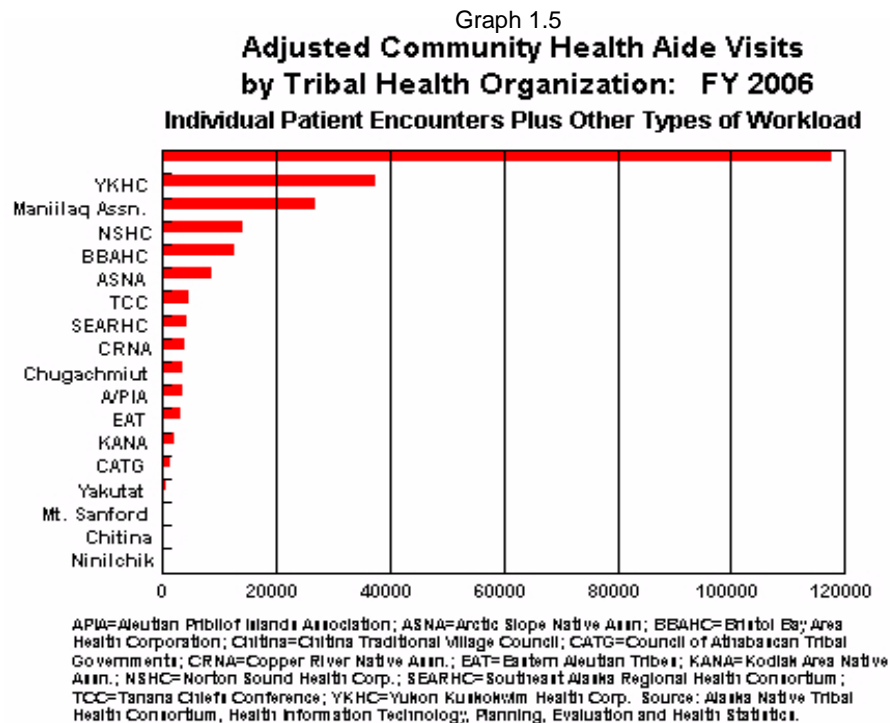
The nursing section of the State of Alaska serves approximately 298 Native and non-native communities with a work force of about 90 public health nurses.

Some regions use their public health nurses for health center visits and others use them for itinerant travel to small communities.

Public health nurses devote most of their time to serving very young children, medically underserved, pregnant women and elderly people.

Contract Health Services. Tribal health programs purchase services for Native patients from private care sources. These services are necessary in areas where direct or tribally operated IHS facilities or services are not readily available. The Alaska Native Medical Center often uses contract health care funds for consulting specialists and for providing specialized care such as cardiac or neurological surgery.

Community Health Centers. Alaska tribes operate 71 health facilities that are operated with P.L. 93-638 funding from the Indian Health Service in addition to Community Health Center (CHC), Section 330 funding from the Health Resources and Services Administration (HRSA). There are 57 tribally operated Community Health Centers (CHCs) that provide all-inclusive full-time services, 3 CHC's that provide all-inclusive part time services, and 11 tribal health facilities that are CHC satellites. Tribal CHC's serve non-native patients on a sliding fee schedule based on income.





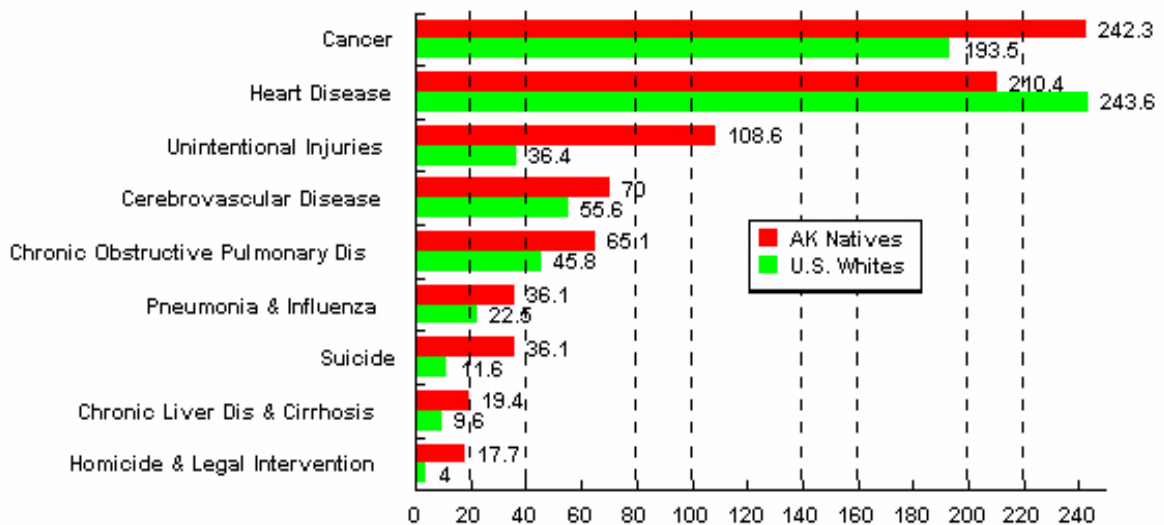
Long-Term Care Services. With the exception of adolescent alcohol treatment programs, the Indian Health Service does not provide long-term care services. Through the conditions of the Indian Self-Determination Act, and with the availability of alternate funding sources, some Alaska tribes are operating long-term care for adolescents, elders and disabled individuals.

The major driving force in the Alaska long-term care system for the next few decades will be the extremely high growth rate of the Native elderly population. At the current growth rate, the 65 to 74 age population will double every 14 years, the 75 to 84 age population will double every 12 years, and the 85 and over population will double every 10 years. High growth rates are coupled with the high cost of providing long-term care in Alaska. Alaska's nursing home costs per day average about \$271 or \$98,915 a year. According to the Providence Extended Care Needs Study, Alaska will need an additional 317 new skilled nursing facility beds in 2008 and 1,118 beds more in 2118.

STATISTICS ON THE HEALTH STATUS OF ALASKA NATIVES

Graph 1.6

Age-Adjusted Mortality Rates* for Leading Causes of Death Alaska Natives vs. U.S. Whites for 5-Year Interval 1999 - 2003



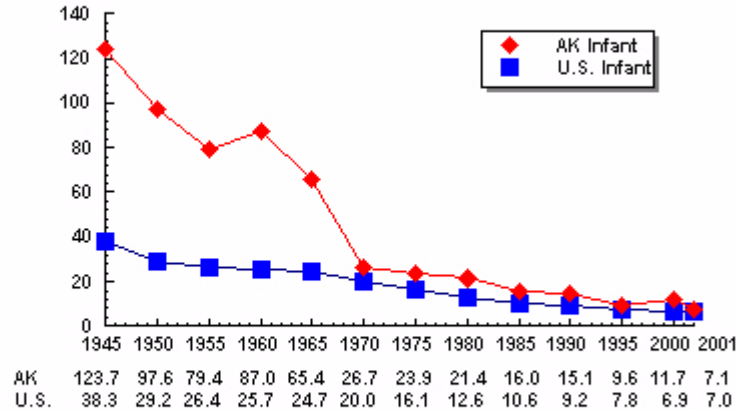
*Age-adjusted to the U.S. 2000 Standard population

Source: *Alaska Native Mortality Update: 1999-2003* Alaska Native Epidemiology Center, Office of Alaska Native Research, Division of Community Health Services, Alaska Native Tribal Health Consortium



Infant Mortality is the number of infant deaths per 1,000 live births.

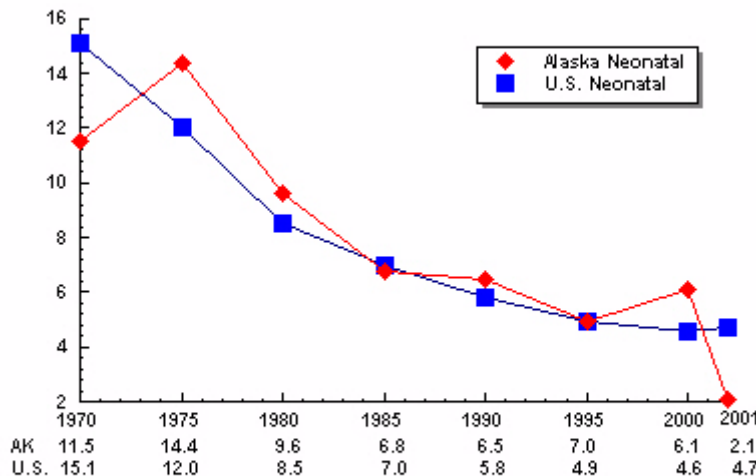
Graph 1.7
Infant Mortality Rates
Alaska Natives vs. U.S.: 1945 - 2002



Alaska Native rates are based on three year averages, using the end year of the three year period. Infant mortality is the number of infant deaths per 1,000 live births. SOURCE: Alaska Native rates are from the report *Alaska Native Births and Infant Deaths 1980-1997*, Alaska Native Tribal Health Consortium, Alaska Area Native Health Service, Division of Planning, Evaluation and Health Statistics. U.S. rates are from the National Center for Health Statistics (NCHS) and are single year rates.

Neonatal Mortality is the number of infant deaths per 1,000 live births.

Graph 1.8
Neonatal Mortality Rates
Alaska Natives vs. U.S.: 1970 - 2002



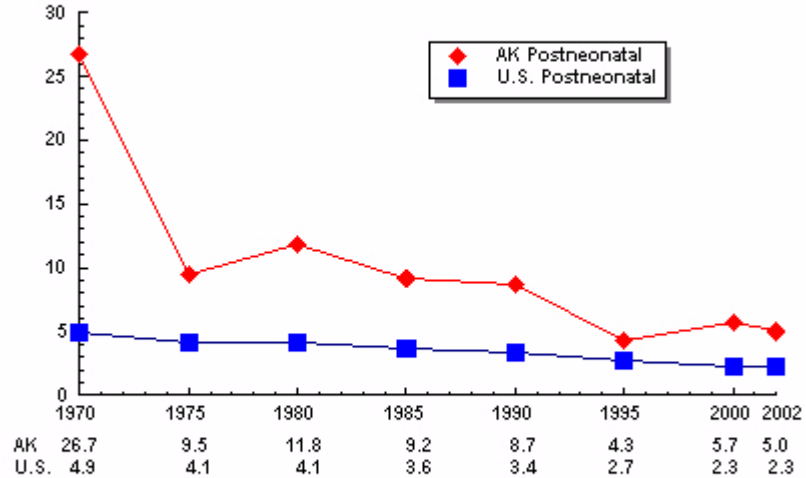
Alaska Native rates are based on three year averages, using the end year of the three year period. Neonatal mortality is the number of infant deaths, from birth to 28 days of age, per 1,000 live births. SOURCE: Alaska Native rates are from the report *Alaska Native Births and Infant Deaths 1980-1997*, Alaska Native Tribal Health Consortium, Alaska Area Native Health Service, Division of Planning, Evaluation & Health Statistics. U.S. rates are from the National Center for Health Statistics (NCHS) and are single year rates.



Postneonatal Mortality is the number of infant deaths, from 28 days to one year of age, per 1,000 live births.

Graph 1.9

Postneonatal Mortality Rates Alaska Natives vs. U.S.: 1970 - 2002



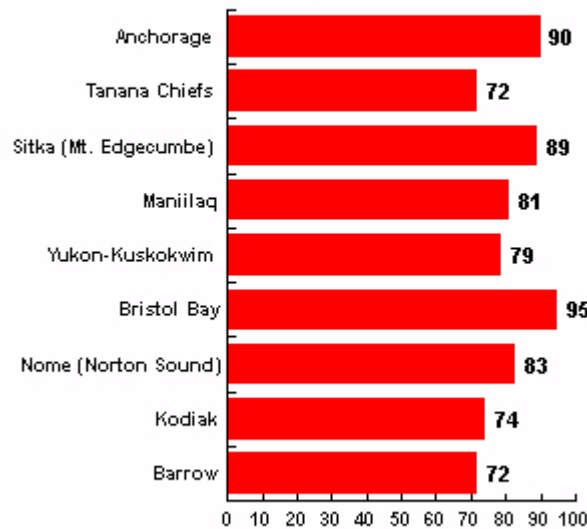
Alaska Native rates are based on three year averages, using the end year of the three year period. Postneonatal mortality is the number of infant deaths, from 28 days to one year of age, per 1,000 live births. SOURCE: Alaska Native rates are from the report Alaska Native Births and Infant Deaths 1980-1997, Alaska Native Tribal Health Consortium, Alaska Area Native Health Service, Division of Planning, Evaluation and Health Statistics. U.S. rates are from the National Center for Health Statistics (NCHS) and are single year rates.

Childhood Immunization Rates

The ANTHC immunization program tracks rates by service area for Alaska Native children and adults.

Graph 1.10

Alaska Native Immunization Rates for 3 - 27 month olds 2005



Based on quarterly data ending 9-30-2005
Source: Alaska Native Tribal Health Consortium Immunization Coordinator

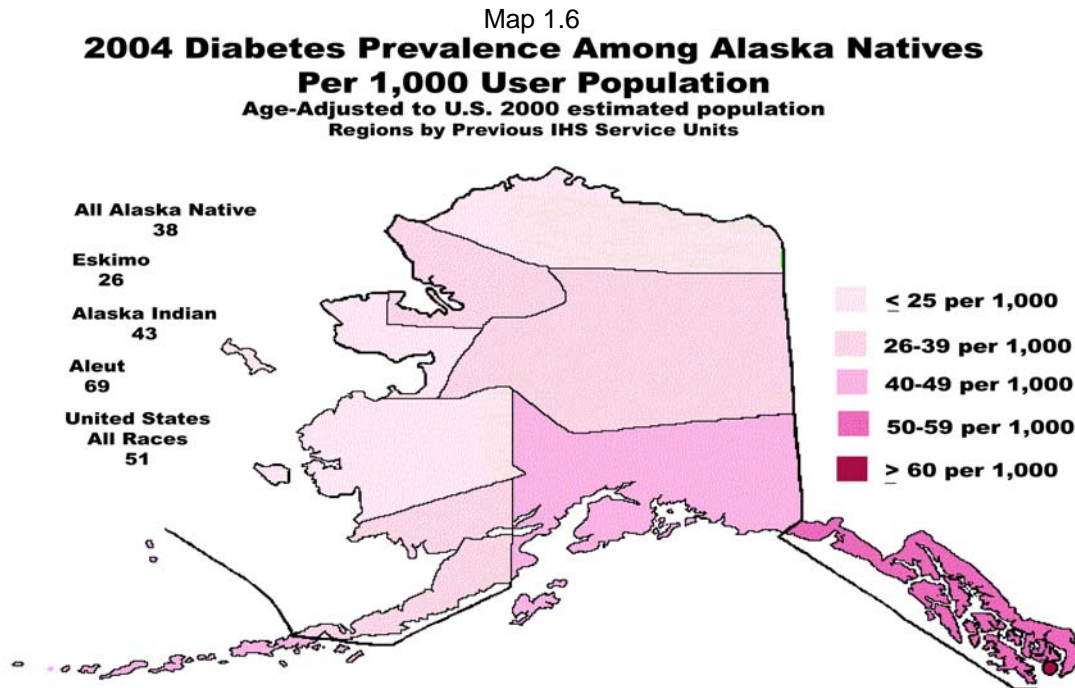
ANTHC Diabetes Program

The ANTHC diabetes team tracks and monitors diabetes among Alaska Natives using a computerized registry. The program provides educational materials, public service

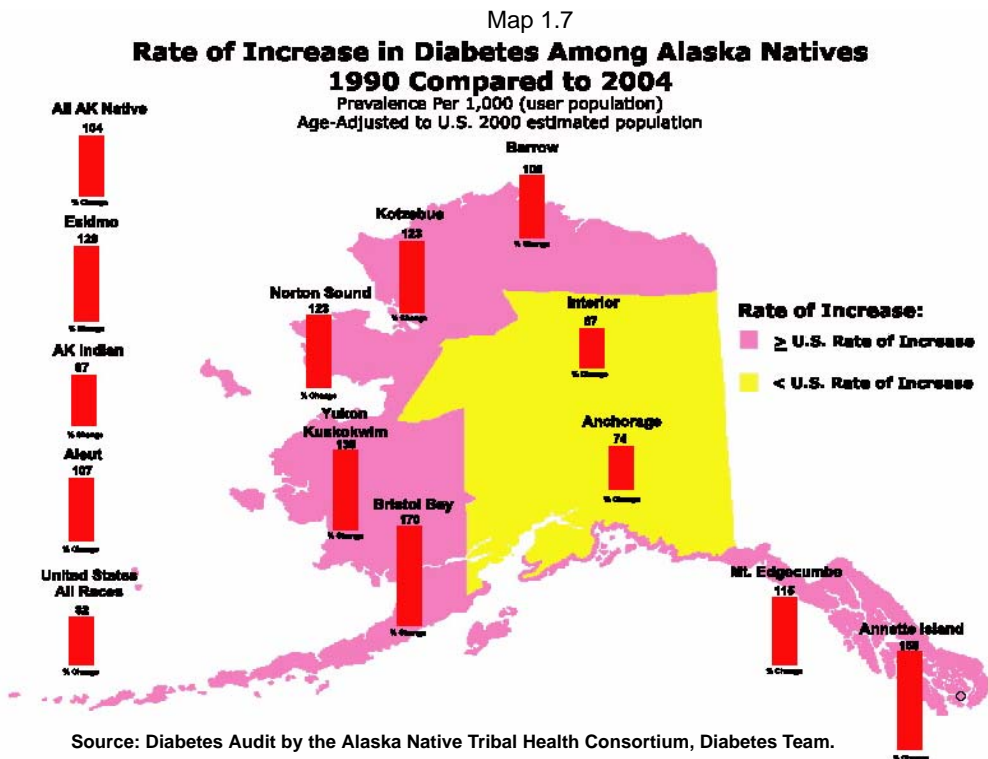
Alaska Area



announcements, organizational facilitation and health fair activities to help educate the public on the prevention and treatment of diabetes.



Source: Diabetes Audit by the Alaska Native Tribal Health Consortium, Diabetes Team.



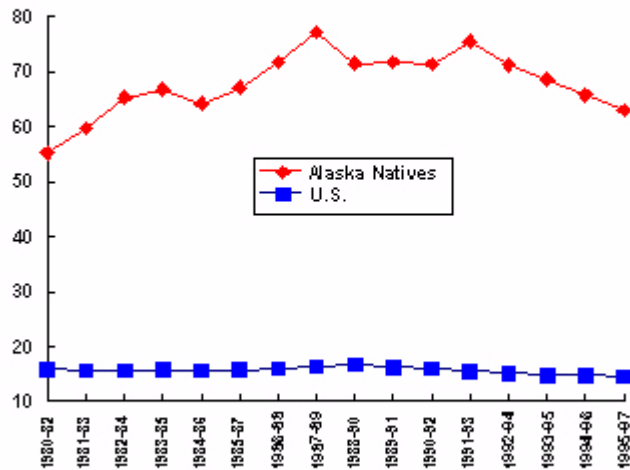
Source: Diabetes Audit by the Alaska Native Tribal Health Consortium, Diabetes Team.



Teen Birth Rates are births per 1,000 women aged 15-17.

Graph 1.11

**Teen Birth Rates - Alaska Native vs. U.S.
Per 1,000 Women: Ages 15-17
Three Year Moving Average
1982 - 1997**

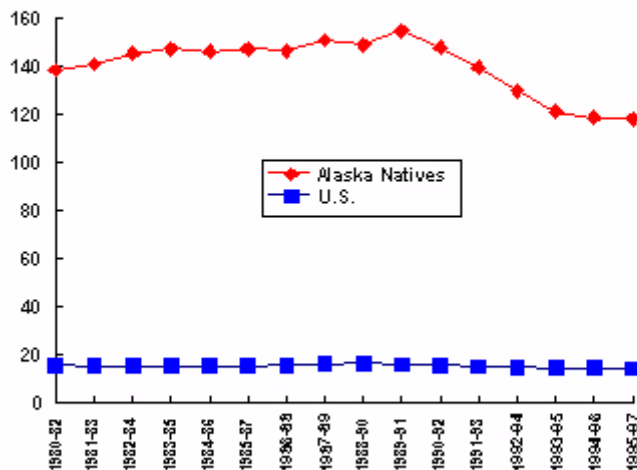


Alaska Native birth rates are rate per 1,000 women aged 15-17. The Alaska Native population figure are

The number of births per 1,000 women aged 15-44 is sometimes referred to as the “fertility rate”.

Graph 1.12

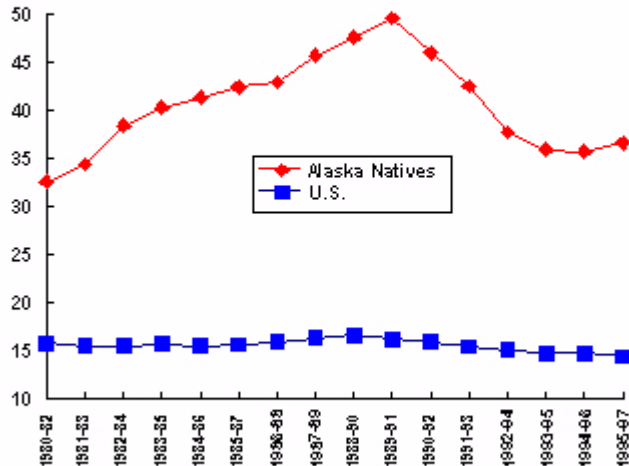
**Alaska Native vs. U.S. Birth Rates
Per 1,000 Women: Ages 15-44
Three Year Moving Average
1982 - 1997**



Alaska Native birth rates are rate per 1,000 women aged 15-17. The Alaska Native population figure are from the State of Alaska's Department of Labor publication "Population Overview." Alaska Native birth rate from IHB report MBU and the three year average is the end year of the three year period. U.S. rates are the



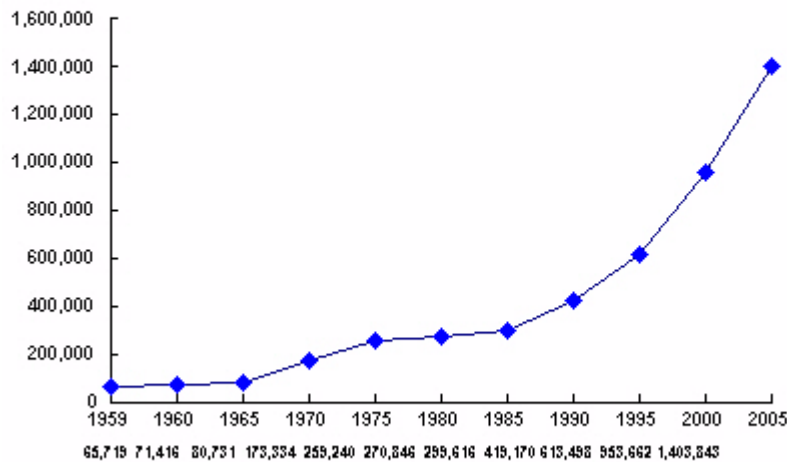
Graph 1.13
Alaska Native vs. U.S. Birth Rates
Per 1,000 Women: Ages 35-44
Three Year Moving Average
1982 - 1997



Alaska Native birth rate are rate per 1,000 women aged 16-17. The Alaska Native population figure are from the State of Alaska's Department of Labor publication "Population Overview." Alaska Native birth rate from IHS report MBU and the three year average to the end year of the three year period. U.S. rate are the single year indicated. The U.S. rate are from the National Center for Health Statistics.

OUTPATIENT WORKLOAD/DIAGNOSES

Graph 1.14
Alaska Area
Outpatient Workload
1959 - 2005



Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 1A



Table 1.3

Alaska Area

Leading Causes of Outpatient Visits for All Age Groups; Alaska Native Totals

All Age Groups Alaska Native	FY 2001	FY 2002	FY2003	FY 2004
Upper Respiratory Problems	47,305	50,747	48,578	58,569
Accidents & Injuries	38,929	38,058	37,268	48,006
Hospital Medical/Surgical Follow-up	28,746	28,671	25,946	39,261
Assessment of Symptoms	22,320	23,665	26,989	34,332
Bone & Joint Disorders	28,436	28,970	31,608	33,567
Pregnancy, Childbirth & Puerperium	12,975	12,580	14,951	33,565
Neuroses & Non-Psychotic Disorders	24,477	23,919	21,579	30,530
Tests Only	48,098	41,433	32,356	28,196
Hypertension	20,964	23,958	21,813	26,946
Otitis Media	20,333	21,253	20,532	24,399

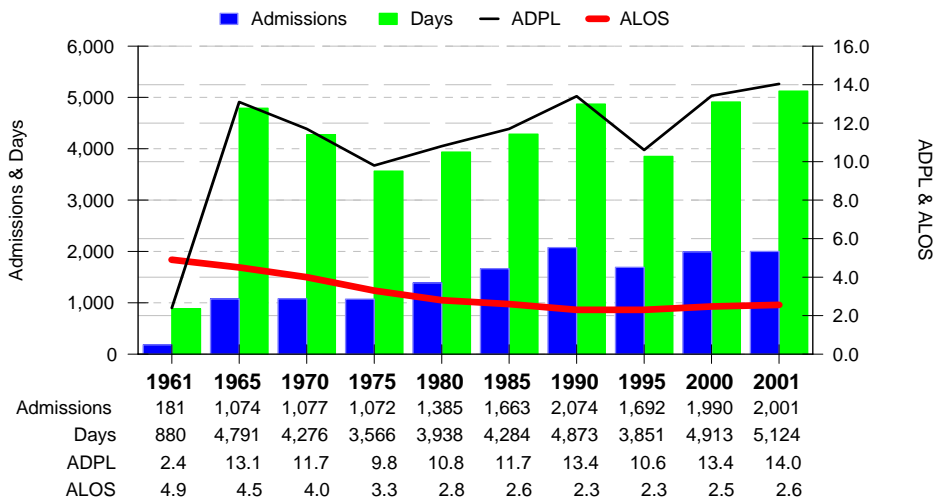
Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 1C.

INPATIENT WORKLOAD

The following graphs display the inpatient workload including and excluding newborns for the Alaska Area.

Graph 1.15

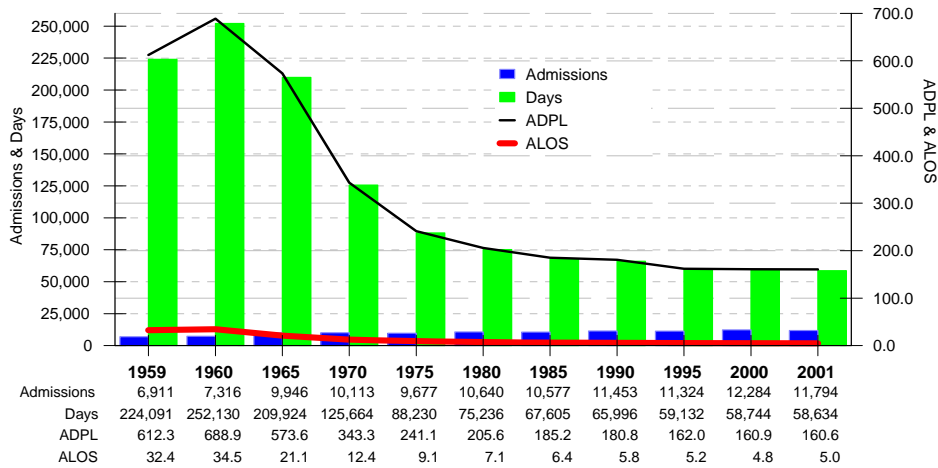
Newborn Inpatient Workload Alaska Area: FY 1961 - FY 2001



ADPL = Average Daily Patient Load; ALOS = Average Length of Stay
Source: HSA-202 Monthly Report of Inpatient Services



Graph 1.16
Inpatient Workload Excluding Newborns
Alaska Area: FY 1959 - FY 2001



ADPL = Average Daily Patient Load; ALOS = Average Length of Stay
 Source: HSA-202 Monthly Report of Inpatient Services

DISCHARGE DIAGNOSES

Table 1.4
Alaska Area
Leading Causes of Inpatient Discharges: FY 2001 - FY 2004

All Age Groups	FY2001	FY 2002	FY 2003	FY 2004
Deliveries (Childbirth)	1,806	1,705	1,825	1,796
Accidents & Injuries	1,350	1,308	1,256	1,146
Pneumonia	646	498	663	595
Bronchitis, Emphysema	398	346	318	369
Infected Skin & Abrasions	466	431	412	361
Heart Disease	462	442	417	351
Complications of Pregnancy	470	411	410	348
Malignant Neoplasms	253	260	224	253
Alcohol Abuse	265	244	169	220
Urinary Tract Diseases	223	252	245	209

Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 2C.



CRITICAL ISSUES

Costs of Providing Health Care in Alaska. The Indian Health Service spends more per-capita to provide medical and community health care services in Alaska than it does in any of the lower 48 states. In most parts of the country, the highest costs of delivering health care services are found in urban areas. This does not hold true in Alaska, where rural residents generally face higher costs than those found in the state's major population centers.

Health Access and Patient Travel in Alaska. About half of Alaska Natives reside in small communities which are isolated from regional hospitals and health centers by immense distances, climatic extremes and geographic barriers. Most rural Alaska communities are not accessible by road, and can be reached only by boat, snowmachine and small aircraft. Several rural communities that serve as regional hubs have commercial jet service. Costs of travel for patients to access any services, not available through the community health aide at the village clinics, are substantial. The airfare to a regional hospital can range from \$100 - \$300, and the airfare between the regional hospital and the Alaska Native Medical Center can cost between \$800 - \$1,200. When surface transportation and lodging costs are included, the cost of routine care is beyond the means of many patients, resulting in the deferral of care and increased likelihood of more serious illness.

INDIAN HEALTH SERVICE APPROPRIATIONS, FY 2004

Akiachak		Arctic Slope	
Services	\$333,711	Services	\$9,478,744
Environmental Health	\$1,574	Environmental Health	\$816,659
Contract Support Costs	\$99,675	Contract Support Costs	\$3,830,308
<u>Total</u>	<u>\$434,960</u>	<u>Total</u>	<u>\$14,125,711</u>
Alaska Native Tribal Health Consortium		Bristol Bay	
Services	\$85,420,940	Services	\$20,044,831
Environmental Health	\$34,429,283	Environmental Health	\$1,322,750
Contract Support Costs	\$8,555,526	Contract Support Costs	\$7,131,851
<u>Total</u>	<u>\$128,405,749</u>	<u>Total</u>	<u>\$28,499,432</u>
APIA		Chickaloon	
Services	\$3,350,639	Services	\$193,158
Environmental Health	\$6,580,161	Environmental Health	\$0
Contract Support Costs	\$783,147	Contract Support Costs	\$15,509
<u>Total</u>	<u>\$10,713,947</u>	<u>Total</u>	<u>\$208,667</u>

SOURCES:

Alaska Area Office of Financial Management; Alaska Native Tribal Health Consortium (ANTHC) Finance Department; Southcentral Foundation (SCF) Finance Department

NOTES:

Excludes special diabetes funds, EPA funds, State of Alaska sanitation funds, and third party collections.

Sub-awards from the Alaska Native Tribal Health Consortium, Southcentral Foundation and Southeast Alaska Regional Health Consortium have been moved to the benefiting tribes.

Arctic Slope includes the Arctic Slope Native Association, Ukpeagvik and North Slope Borough contracts.

Alaska Area



Chitina			Hoonah		
Services	\$236,826		Services	\$304,393	
Environmental Health	\$515		Environmental Health	\$3,702	
Contract Support Costs	\$90,931		Contract Support Costs	\$128,648	
Total	\$328,272		Total	\$436,743	
Chugachmiut			Karluk		
Services	\$4,205,031		Services	\$113,256	
Environmental Health	\$120,157		Environmental Health	\$358	
Contract Support Costs	\$1,344,990		Contract Support Costs	\$77,815	
Total	\$5,670,178		Total	\$191,429	
CATG			Kenaitze		
Services	\$1,601,405		Services	\$1,822,845	
Environmental Health	\$7,463		Environmental Health	\$4,680	
Contract Support Costs	\$904,107		Contract Support Costs	\$220,648	
Total	\$2,512,975		Total	\$2,048,173	
Copper River			Ketchikan		
Services	\$2,533,969		Services	\$5,065,596	
Environmental Health	\$45,411		Environmental Health	\$175,504	
Contract Support Costs	\$654,355		Contract Support Costs	\$2,383,355	
Total	\$3,233,735		Total	\$7,624,455	
Diomede			Knik		
Services	\$108,982		Services	\$210,803	
Environmental Health	\$737		Environmental Health	\$0	
Contract Support Costs	\$85,400		Contract Support Costs	\$16,858	
Total	\$195,119		Total	\$227,661	
East Aleutians			Kodiak		
Services	\$3,284,517		Services	\$5,871,119	
Environmental Health	\$29,572		Environmental Health	\$152,403	
Contract Support Costs	\$429,501		Contract Support Costs	\$1,479,643	
Total	\$3,743,590		Total	\$7,503,165	
Eklutna			Kwinhagak		
Services	\$314,702		Services	\$264,163	
Environmental Health	\$1,187		Environmental Health	\$0	
Contract Support Costs	\$24,130		Contract Support Costs	\$103,129	
Total	\$340,019		Total	\$367,292	

SOURCES:

Alaska Area Office of Financial Management; Alaska Native Tribal Health Consortium (ANTHC) Finance Department; Southcentral Foundation (SCF) Finance Department

NOTES:

Excludes special diabetes funds, EPA funds, State of Alaska sanitation funds, and third party collections. Sub-awards from the Alaska Native Tribal Health Consortium, Southcentral Foundation and Southeast Alaska Regional Health Consortium have been moved to the benefiting tribes. The Council of Athabascan Tribal Governments includes both P.L. 93-638 Title I and Title V contracts.

Alaska Area



Indian Health Service Appropriations, FY 2004

Maniilaq			Southcentral		
Services	\$23,565,726		Services	\$51,062,982	
Environmental Health	\$1,207,663		Environmental Health	\$1,151,308	
Contract Support Costs	\$9,789,280		Contract Support Costs	\$14,114,493	
<i>Total</i>	<u>\$34,562,669</u>		<i>Total</i>	<u>\$66,328,783</u>	
Metlakatla			SEARCHC		
Services	\$2,690,840		Services	\$31,023,153	
Environmental Health	\$9,215,965		Environmental Health	\$1,787,244	
Contract Support Costs	\$673,319		Contract Support Costs	\$8,061,712	
<i>Total</i>	<u>\$12,580,124</u>		<i>Total</i>	<u>\$40,872,109</u>	
Mt. Sanford			St. George		
Services	\$897,572		Services	\$138,794	
Environmental Health	\$1,374		Environmental Health	\$704	
Contract Support Costs	\$222,475		Contract Support Costs	\$39,317	
<i>Total</i>	<u>\$1,121,421</u>		<i>Total</i>	<u>\$178,815</u>	
Ninilchik			Tanana Chiefs		
Services	\$621,620		Services	\$27,950,230	
Environmental Health	\$2,971		Environmental Health	\$618,540	
Contract Support Costs	\$228,614		Contract Support Costs	\$5,007,138	
<i>Total</i>	<u>\$853,205</u>		<i>Total</i>	<u>\$33,575,908</u>	
Norton Sound			Tanana IRA		
Services	\$17,075,696		Services	\$878,530	
Environmental Health	\$994,274		Environmental Health	\$119,750	
Contract Support Costs	\$5,538,030		Contract Support Costs	\$228,707	
<i>Total</i>	<u>\$23,608,000</u>		<i>Total</i>	<u>\$1,226,987</u>	
Seldovia			Tyonek		
Services	\$1,035,655		Services	\$479,987	
Environmental Health	\$2,423		Environmental Health	\$501	
Contract Support Costs	\$271,003		Contract Support Costs	\$72,446	
<i>Total</i>	<u>\$1,309,081</u>		<i>Total</i>	<u>\$552,934</u>	

SOURCES:

Alaska Area Office of Financial Management; Alaska Native Tribal Health Consortium (ANTHC) Finance Department; Southcentral Foundation (SCF) Finance Department

NOTES:

Excludes special diabetes funds, EPA funds, State of Alaska sanitation funds, and third party collections.

Sub-awards from the Alaska Native Tribal Health Consortium, Southcentral Foundation and Southeast Alaska Regional Health Consortium have been moved to the benefiting tribes.

Southcentral Foundation includes Cook Inlet Tribal Council funds.

Tanana Chiefs includes both P.L. 93-638 Title I and Title V Tanana Chiefs and Fairbanks Native Association funds.

Alaska Area



Indian Health Service Appropriations, FY 2004

Valdez			Yukon Kuskokwim		
Services	\$160,745		Services	\$38,306,893	
Environmental Health	\$480		Environmental Health	\$7,504,690	
Contract Support Costs	\$70,943		Contract Support Costs	\$13,380,748	
<i>Total</i>	<u>\$232,168</u>		<i>Total</i>	<u>\$59,192,331</u>	
Yakutat			GRAND TOTAL		
Services	\$261,989		Services	\$0	
Environmental Health	\$3,730		Environmental Health	\$0	
Contract Support Costs	\$95,490		Contract Support Costs	\$0	
<i>Total</i>	<u>\$361,209</u>		<i>Total</i>	<u>\$0</u>	

SOURCES:

Alaska Area Office of Financial Management; Alaska Native Tribal Health Consortium (ANTHC) Finance Department; Southcentral Foundation (SCF) Finance Department

NOTES:

Excludes special diabetes funds, EPA funds, State of Alaska Sanitation funds, and third party collections. Sub-awards from the Alaska Native Tribal Health Consortium, Southcentral Foundation and Southeast Alaska Regional Health Consortium have been moved to the benefiting tribes.