

Indian Health Service Rockville MD 20852

JUN 28 2004

Dear Tribal Leader:

Enclosed for your review and comment is a draft revision to the Indian Health Service (IHS) Healthcare Facilities Construction Priority System (HFCPS) Methodology. This revision is in response to language in the conference report accompanying the fiscal year 2000 Interior Appropriations Act, in which Congress directed the IHS to "work closely with the Tribes and the Administration to make needed revisions to the facilities construction priority system."

In addition to commenting on the draft revision to the HFCPS Methodology; I would like your input on two specific issues: 1) How should the HFCPS estimate required space? and 2) What should the HFCPS use as a health status/health resources indicator?

The IHS Facilities Appropriation Advisory Board (FAAB), which is composed of a representative from Tribes in each IHS Area and two IHS representatives, has indicated that the base Health System Planning Process and the small clinic criteria should be used to estimate the required space. However, there were enough concerns about this issue that the FAAB recommended the IHS ask you for your input. Also, the FAAB could not reach a consensus on whether the full Federal Health Benefits Plan Disparities Index (FDI) or only the health status indicators in the FDI should be used as the health status/health resources indicator. A more complete explanation of these options is contained in the enclosed draft revision to the HFCPS Methodology.

The IHS initiated the process of reviewing the HFCPS by forming the Facilities Needs Assessment Workgroup, which reported to the FAAB. The FAAB advised the IHS to revise the HFCPS based on the recommendations in the workgroup's report and assisted the IHS in making the revisions. The full report of the workgroup is available on the Internet at:

http://www.oehe.ihs.gov/faab/workgroup/workgroupfr.pdf an executive summary of the report is in Exhibit A of the draft revision to the HFCPS Methodology. The draft revision incorporates most of the workgroup's recommendations, including all of the recommended criteria, and is consistent with the workgroup's intent that the HFCPS provide a "universal list that reflects the priorities across Indian Country." There is an executive summary of the revised methodology at the beginning of the document.

Please provide your comments to Mr. Bruce Chelikowsky, Acting Director, Office of Environmental Health and Engineering, IHS, by October 15, 2004. His address is 801 Thompson Avenue, Suite 120, Rockville, Maryland, 20852. You also may submit comments by email to hfcps@ihs.gov or by fax on (301) 443-5697. The IHS will address all comments and suggestions by incorporating them in the HFCPS or through a separate document explaining the decisions made. If you have any questions on this matter, you may call Mr. Chelikowsky on (301) 443-1247.

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The HFCPS, when finalized based on input from all Tribal Leaders, will be used to assess and prioritize facilities construction needs for all Tribes. Therefore, I encourage you to review this document closely. Thank you for your participation in this important matter.

Sincerely yours,

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

Assistant Surgeon General

Director

Enclosure

cc: Tribal Health Directors

Area Directors