



Office of Rural Health

Veterans Affairs – Indian Health Service Memorandum of Understanding

Office of Rural Health
Office of the Assistant Deputy Under Secretary for Health for Policy and Planning
Veterans Health Administration





Ribbon Cutting Moment





State of the Art



Brian Wilkinson/Sierra Star



MOU Background



- **Memorandum of Understanding signed between VA and IHS on October 1, 2010**
- **Purpose is to establish coordination, collaboration and resource-sharing between VA and IHS with the goal of improving the health status of American Indian and Alaska Native Veterans**
- **Builds upon decades of successful collaboration and achievements from 2003 MOU**
- **Main differences between 2010 MOU and 2003 MOU:**
 - **Includes more areas of focus and is more specific (e.g., joint emergency preparedness, joint credentialing, cultural awareness)**
 - **Recognizes the Indian Health Care Improvement Act**
 - **MOU mutual goals include a emphasis on promoting patient-centered collaborations and consulting tribes at the regional and local levels**



MOU Areas of Focus



- **Specific areas of focus:**
 - **Increase access to service and benefits – expand Tribal Veterans Representative program; train Benefits Coordinators at IHS**
 - **Improve coordination of care – develop innovative approaches to dissemination of best practices**
 - **Develop health information technology systems– interoperability of systems to facilitate sharing of information on patients**
 - **Implement new technologies – tele-health services; mobile communication technologies**
 - **Improve efficiency at system level – sharing of contract and purchasing agreements; standard policies for shared facilities**
 - **Develop payment and reimbursement policies – sharing and coordination of services**



MOU Areas of Focus con't



- **Improve delivery of care – collaborate on Consolidated Mail Outpatient Pharmacy, dementia care**
- **Increase cultural awareness – attention to cultural issues when caring for American Indians and Alaska Native Veterans**
- **Increase capacity through training – joint training initiatives; joint continuing education units**
- **Increase access through shared staff – joint credentialing and privileging of staff**
- **Address emergency preparedness – share contingency planning and preparedness efforts**
- **Develop Implementation Task Force – joint workgroups for short-term and ongoing work to accomplish aims of MOU**



Central California Health Care System Community-Based Outpatient Clinic







Tamberg Units





Next Steps



- Recruitment of members to serve on workgroups that pertain to each of the MOU's 12 areas of focus
- A number of work group leaders have met and they have developed action items
- Development of far reaching policies and programs between VA and IHS
- Revise VA-IHS MOU as needed to meet the needs of Veterans
- Point of Contact for this in ORH is:

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**Now our work begins with the workgroup
formation and implementation**

QUESTIONS?

Thank you!