

IHS Budget Formulation for FY 2014:

Indian Health Service/California Area Office
Tribal Budget Consultation
December 14, 2011

Objectives

- Link California-specific GPRA performance to FY 2014 proposed IHS budget
- Link environmental health and engineering projects to FY 2014 proposed IHS budget
- Identify and rank five health/disease priorities for increase in the FY 2014 budget for California
- Identify and rank three health/disease priorities for decrease in the event of a reduction in the IHS appropriation
- Based on tribal consultation, complete FY 2014 proposed budget worksheet by budget line and submit to IHS/HQS by January 6, 2012



2013 California Tribal Priorities

□ Health/Disease Priorities:

- Contract Health Service (Pharmaceuticals)
- Indian Health Care Improvement Fund (Pharmaceuticals)
- Obesity/Diabetes + Complications (Dialysis)
- Behavioral Health (Substance Abuse, Suicide Prevention, Domestic Violence)
- Cancer
- Heart Disease
- Dental

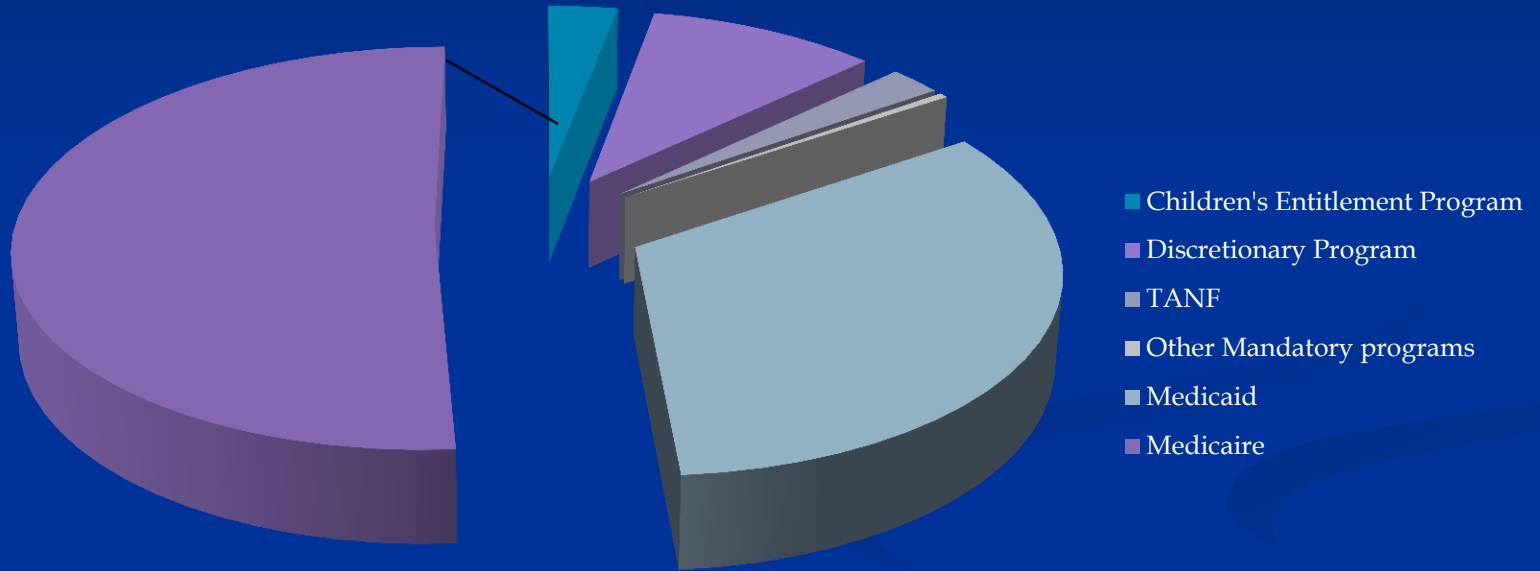
□ Critical Priorities: (there are two first priorities)

- Water/Sanitation Projects – Maintenance & Improvement
- Health Facilities Construction Priority System Area Distribution (HFC – Ambulance program)
- Small Ambulatory (recommend \$8 –10 million per project)
- Injury Prevention

Linking GPRA Performance Measures to the IHS Budget

- Overview of the IHS budget process
- Overview of GPRA performance
- California specific results and potential impact on patients

THE HHS BUDGET FY 2011- \$911B



IHS Tribal Consultation Policy

Budget Formulation Process





Performance Measures

- Government Performance and Results Act (GPRA) of 1993 holds federal agencies accountable for using resources wisely and achieving program results
- All agencies must have performance measures that demonstrate achievements
- Performance measures and targets are negotiated between each federal agency and the President's Office of Management and Budget (OMB)



Performance Measures, continued

- ❑ OMB's Program Assessment Rating Tool (PART)
- ❑ Comprehensive evaluation of individual programs within an agency
- ❑ Tribally Operated Health Programs reviewed in FY 2005
- ❑ OMB and agency establish performance measures to continue monitoring the program
- ❑ Obama administration has continued this monitoring

Linking Measures to the Federal Budget

- National level
 - GPRA and PART results reported in each federal agency's budget request to Congress
 - Results can be impacted by program funding level
- Area level
 - Performance measure data is useful in identifying health/disease priorities

2011 National Dashboard (IHS/Tribal) - Final

2011 Q4 National Dashboard (IHS/Tribal)					
DIABETES	2010 Target	2010 Final	2011 Target	2011 Final	2011 Final Results
Diabetes Dx Ever	N/A	12%	N/A	12.8%	N/A
Documented A1c	N/A	82%	N/A	83.0%	N/A
Poor Glycemic Control	16%	18%	19.4%	19.1%	Met
Ideal Glycemic Control	33%	32%	30.2%	31.9%	Met
Controlled BP <130/80	40%	38%	35.9%	37.8%	Met
LDL (Cholesterol) Assessed	69%	67%	63.3%	68.7%	Met
Nephropathy Assessed	54%	55%	51.9%	56.5%	Met
Retinopathy Exam	55%	53%	50.1%	53.5%	Met
DENTAL					
Dental: General Access	27%	25%	23.0%	26.9%	Met
Sealants	257,920	275,459	257,261	276,893	Met
Topical Fluoride- Patients	136,978	145,181	135,604	161,461	Met
IMMUNIZATIONS					
Influenza 65+	60%	62%	58.5%	62.0%	Met
Pneumovax 65+	83%	84%	79.3%	85.5%	Met
Childhood IZ ^a	80%	79%	74.6%	75.9%	Met
PREVENTION					
(Cervical) Pap Screening	60%	59%	55.7%	58.1%	Met
Mammography Screening	47%	48%	46.9%	49.8%	Met
Colorectal Cancer Screening	36%	37%	36.7%	41.7%	Met
Tobacco Cessation	27%	25%	23.7%	29.4%	Met
Alcohol Screening (FAS Prevention)	55%	55%	51.7%	57.8%	Met
DV/IPV Screening	53%	53%	52.8%	55.3%	Met
Depression Screening	53%	52%	51.9%	56.5%	Met
CVD-Comprehensive Assessment	33%	35%	33.0%	39.8%	Met
Prenatal HIV Screening	77%	78%	73.6%	80.0%	Met
Childhood Weight Control ^b	24%	25%	N/A	24.1%	N/A

^a4 Pnuemococcal conjugate vaccines added to Childhood Immunization series in FY 2011.

^bLong-term measure as of FY 2009, next reported in FY 2013.

Measures Met: 21

Measures Not Met: 0

California Area – 2011 Final

2011 Final GPRA Dashboard					
	California Area	California Area	National	National	2011 Final
DIABETES	2011-Final	2010-Final	2011-Final	2011 Target	Results - California Area
Diabetes Dx Ever	10.7%	11%	12.8%	N/A	N/A
Documented A1c	84.1%	83%	83.0%	N/A	N/A
Poor Glycemic Control	15.2%	15%	19.1%	19.4%	Met
Ideal Glycemic Control	36.2%	37%	31.9%	30.2%	Met
Controlled BP <130/80	33.9%	35%	37.8%	35.9%	Not Met
LDL (Cholesterol) Assessed	69.6%	67%	68.7%	63.3%	Met
Nephropathy Assessed	54.3%	48%	56.5%	51.9%	Met
Retinopathy Exam	47.4%	47%	53.5%	50.1%	Not Met
DENTAL					
Dental: General Access	41.4%	43%	26.9%	23.0%	Met
Sealants	14,307	13,926	276,893	257,261	N/A
Topical Fluoride- Patients	10,671	9,750	161,461	135,604	N/A
IMMUNIZATIONS					
Influenza 65+	53.3%	54%	62.0%	58.5%	Not Met
Pneumovax 65+	82.0%	80%	85.5%	79.3%	Met
Childhood IZ ^a	70.2%	72%	75.9%	74.6%	Not Met
PREVENTION					
(Cervical) Pap Screening	49.1%	51%	58.1%	55.7%	Not Met
Mammography Screening	45.4%	45%	49.8%	46.9%	Not Met
Colorectal Cancer Screening	35.5%	32%	41.7%	36.7%	Not Met
Tobacco Cessation	25.1%	25%	29.4%	23.7%	Met
Alcohol Screening (FAS Prevention)	47.5%	43%	57.8%	51.7%	Not Met
DV/IPV Screening	48.1%	48%	55.3%	52.8%	Not Met
Depression Screening	46.0%	39%	56.5%	51.9%	Not Met
CVD-Comprehensive Assessment	44.7%	43%	39.8%	33.0%	Met
Prenatal HIV Screening	64.4%	62%	80.0%	73.6%	Not Met
Childhood Weight Control ^b	23.0%	24%	24.1%	N/A	N/A

^a4 Pneumococcal conjugate vaccines added to Childhood Immunization series in FY 2011

^bLong-term measure as of FY 2009, next reported FY 2013

Measures Met = 8

Measures Not Met = 11

Diabetes

- Six measures are reported in budget
 - In 2011 California missed 2 of the 6 diabetes measures:
 - Controlled Blood Pressure <130/80
 - Retinopathy Exam
 - In 2010 California missed these same 2 measures

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Diabetic patients in California clinics reporting GPRA with BP > 130/80
Controlled BP <130/80	33.9%	35%	37.8%	35.9%	3271

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Diabetic patients in California clinics reporting GPRA with no retinopathy examination
Retinopathy Exam	47.4%	47%	53.5%	50.1%	2601

Obesity

- Childhood Weight Control
 - Measures number of children 2-5 with BMI at the 95th or higher percentile
- 2011 result shows improvement from 24% to 23%; lower than national result of 24.1%

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Children 2-5 with BMI at the 95th or higher percentile in California clinics reporting GPRA (A lower rate is the long-term goal for this measure.)
Childhood Weight Control	23.0%	24%	24.1%	N/A	1747

Alcohol/Substance Abuse

- One measure links to this budget priority
 - Alcohol screening of women ages 15-44 to prevent Fetal Alcohol Syndrome
 - California missed target in 2009, 2010, and 2011
 - California improved in 2011 but is 10 percentage points behind national average

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Women ages 15-44 in California clinics reporting GPRA not screened for alcohol use
Alcohol Screening (FAS Prevention)	47.5%	43%	57.8%	51.7%	6306



Cancer

- National measures include cervical cancer screening (Pap); breast cancer screening (mammograms); and colorectal cancer screening – missed all in 2010 and 2011
- California well below national average on all 3

Cancer

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Women ages 21-64 in California clinics reporting GPRA not screened for Cervical Cancer in the past 3 years
Cervical Cancer Screening (Pap screen)	49.1%	51%	58.1%	55.7%	7029

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Women ages 52-64 in California clinics reporting GPRA not screened for Breast Cancer in the past 2 years
Breast Cancer Screening (Mammograms)	45.4%	45%	49.8%	46.9%	1688

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Men and women ages 51-80 in California clinics reporting GPRA not screened for Colorectal Cancer in the past year
Colorectal Cancer Screening	35.5%	32%	41.7%	36.7%	5704

Heart Disease

- ❑ One national measure links directly to this priority
- ❑ Comprehensive Cardiovascular Disease screen
- ❑ CA met this measure in 2009, 2010, and 2011:

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	IHD Patients (ages 22+) in California clinics reporting GPRA with no comprehensive assessment (BP, LDL, Tobacco Use, BMI, & lifestyle counseling)
CVD - Comprehensive Assessment	44.7%	43%	39.8%	33%	727

Behavioral Health/Mental Health

- One national measure for which we have CA specific data:
 - Number of patients aged 18 and older screened for depression
 - California performance improved but still 10 percentage points below national average

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Patients (ages 18+) in California clinics reporting GPRA not screened for Depression
Depression Screening	46.0%	39%	56.5%	51.9%	17,039



Health Promotion/Disease Prevention

- No specific national measures
- The following performance measures are linked to the California HP/DP integration plan
 - Domestic/intimate partner violence
 - Tobacco cessation
 - Childhood weight control
 - Immunizations
 - Influenza; Pneumovax; Childhood immunizations

Domestic/intimate partner violence

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Women ages 15-40 in California clinics reporting GPRA not screened for DV/IPV
DV/IPV Screening	48.1%	48%	55.3%	52.8%	5623

Tobacco cessation

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Patients identified as tobacco users in California clinics reporting GPRA who have not received tobacco cessation counseling
Tobacco Cessation	25.1%	25%	29.4%	23.7%	9192

Immunizations

Measure	2011 California Area Result	2010 California Area Result	2011 National Average	2011 National Target	Patients in California clinics reporting GPRA not vaccinated
Influenza 65+	53.3%	54%	62.0%	58.5%	1542
Pneumovax 65+	82.0%	80%	85.5%	79.3%	595
Childhood Immunizations	70.2%	72%	75.9%	74.6%	272



Example of GPRA screening impact

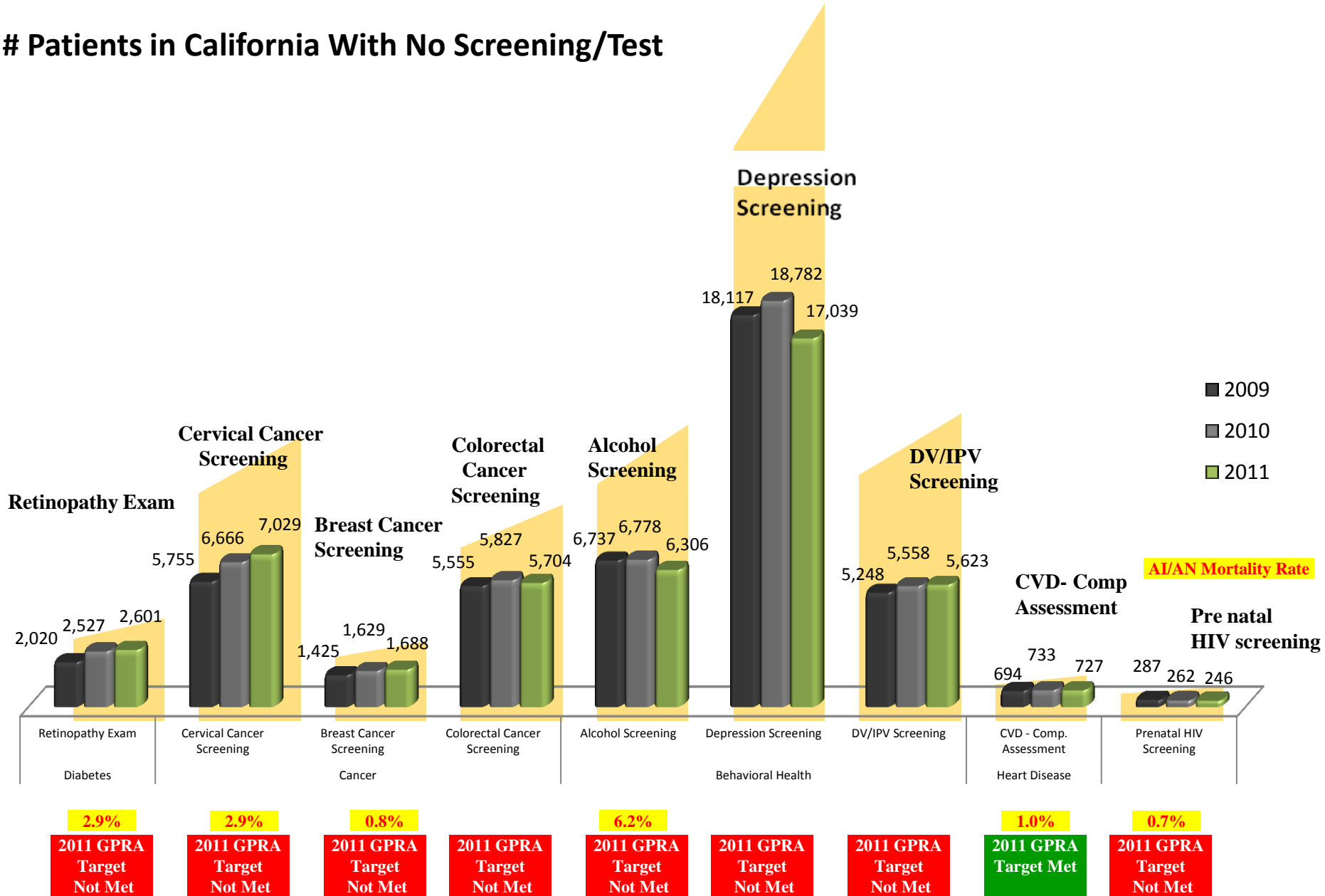
- ❑ For colorectal cancer screening, up to one life can be saved for every 100 people screened; if a tribal health program were to screen 1,000 eligible Indians, 10 lives would be saved
- ❑ For cervical cancer screening, for every 25 year old female who has never been screened, 3-4 lives can be saved per 1,000 Paps



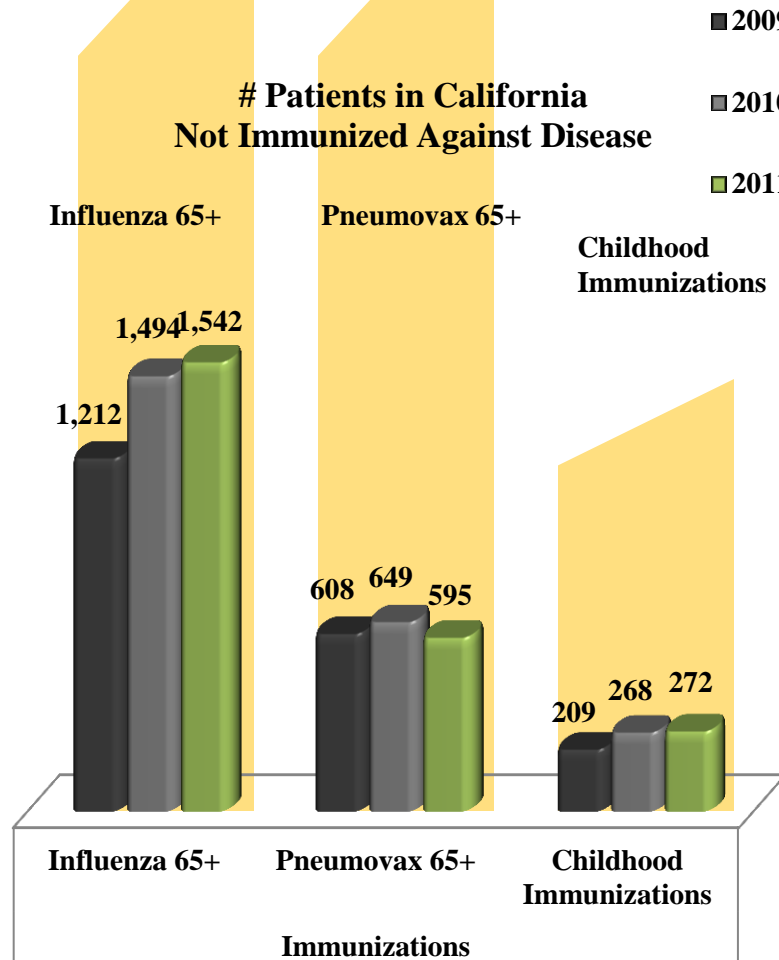
Return on investment

- Besides the obvious pain and suffering of advanced cancer, each case usually costs over \$100,000
- So, in the case of colorectal cancer screening, for every 100 people screened, a health program can potentially save \$100,000
- Resulting return on investment is 10,000%

Patients in California With No Screening/Test



Patients in California Not Immunized Against Disease



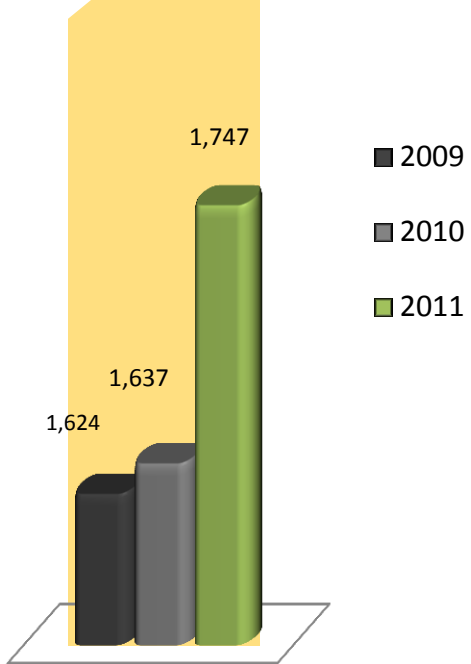
AI/AN Mortality Rate from Pneumonia & Influenza = 1.7%

2011 GPRA
Target
Not Met

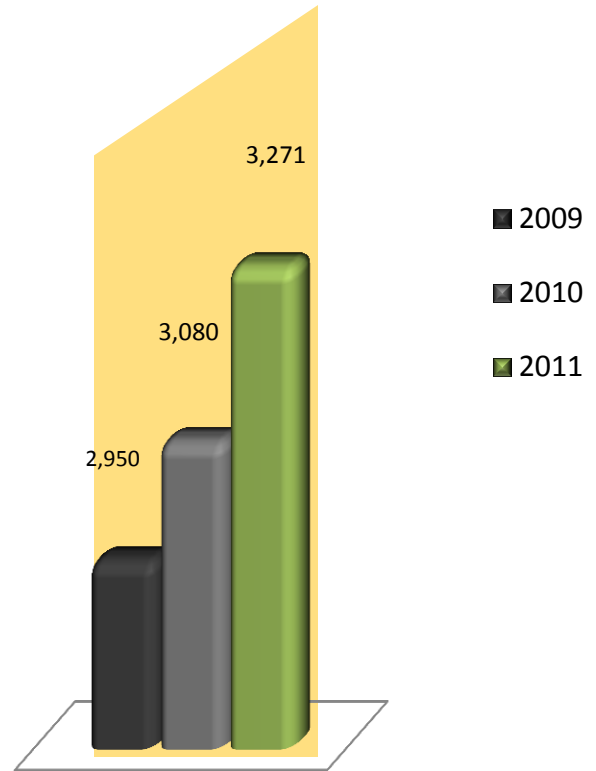
2011 GPRA
Target Met

2011 GPRA
Target
Not Met

of Obese Children in California



Patients in California with Uncontrolled Blood Pressure



2011 GPRA
Target
Not Met

Office of Environmental Health & Engineering

Programs and Services

- ❑ Environmental Health Services
- ❑ Injury Prevention Program
- ❑ Sanitation Facilities Construction
- ❑ Health Facilities Engineering

Division of Environmental Health Services

□ Background/Issue

Address environmental health risks and hazards in Tribal communities by:

- Comprehensive EH Surveys
- Epidemiology/investigations
- Training
- Sampling/testing
- Technical assistance/program support

□ Tribal Facilities include:

- Casinos
- Food services – all types
- Head Starts\childcare
- Senior citizen programs
- Healthcare programs (x-ray, safety, accreditation)
- Hotel\motels
- Water\wastewater systems



EH Program/Projects

□ Unmet Need

Workload ~ 1569 Tribal Facilities

- Increase funding to provide for additional staffing ~ 12 positions
- Workload for California requires ~ 20 DEHS staff members

□ Projects

- Nitrous Oxide survey - Dental
- Food Safety – casino based
- Vector borne prevention



Injury Prevention

□ Background/Issue

- Injuries are a large public health burden for American Indians*
- Third leading cause of death for all ages*
- Leading cause of death for persons 1-44 years*
- Motor vehicle injuries are the leading injury type, followed by unintentional poisonings, suicides, and falls*
- Cost benefit example: Research by Piland (2010).....every dollar spent on motor vehicle injury prevention in one Tribal community resulted \$10 savings from reduced medical and other costs

Injury Prevention

- Unmet Need
 - Workload requires ~ 5.5 IHS staff positions
 - Increase staffing to provide support to Tribes ~ 5 positions
 - Increase funding to establish Tribal IP Programs ~ 29



Water/Sanitation Projects

- 2011 SFC Update:
 - Homes funded for sanitation facilities : 1,678
 - 25 sanitation facility projects funded: \$8.5 million

- Long term SFC goals:
 - By 2015 increase CA Indian homes with safe water to 94%
 - Currently 9% CA Indian homes lack safe water, compared to 1% US
 - Sustainable O&M of tribal drinking water and wastewater systems
 - Adequate operation and maintenance of these systems has a profound impact on public health, reliability of service and tribal sovereignty.

Water/Sanitation Projects: Unmet Needs

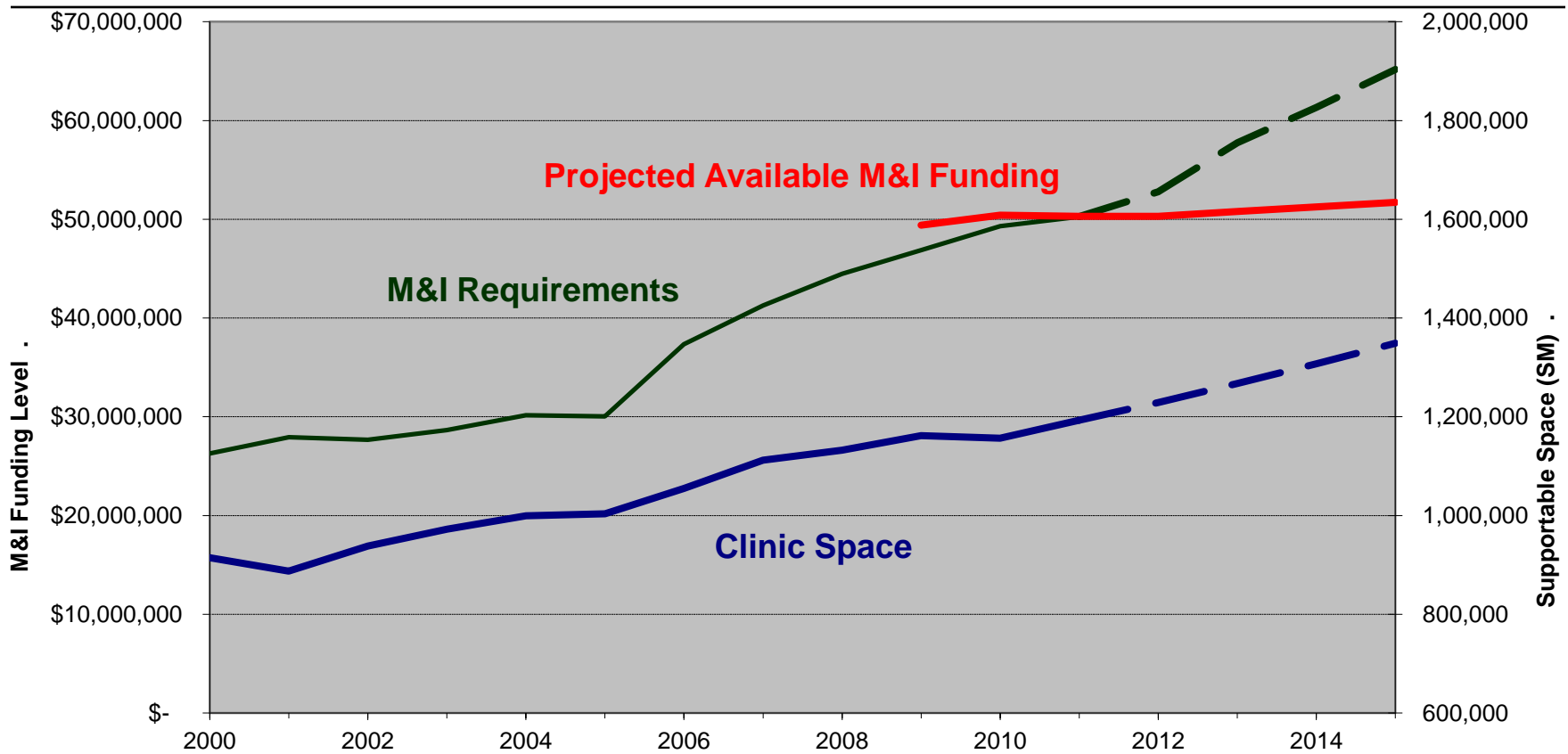
DEFICIENCY LEVEL	1	2	3	4	5	TOTAL
Homes	4,428	1,732	4,506	2,113	388	13,167
Number of Projects	3	107	138	46	2	296
Total Unfunded Need	\$3,635,000	\$81,778,017	\$73,291,642	\$33,326,639	\$4,936,000	\$196,967,298

DL 3: The deficiency level that describing an Indian tribe or community with a sanitation system that has an inadequate or partial water supply and a sewage disposal facility that does not comply with applicable water supply and pollution control laws, or has no solid waste disposal.

DL 4: The deficiency level that describing an Indian tribe or community with a sanitation system which lacks either a safe water supply system or a sewage disposal system

DL 5: The deficiency level that describing an Indian tribe or community that lacks safe water supply and a sewage disposal system.

M&I REQUIREMENTS WILL OUTPACE BUDGET INCREASES



California Backlog of Essential Maintenance and Repairs (BEMAR) \$19.4 M

Tribally Constructed New Healthcare Facilities

Avenues of Funding

- Joint Venture Projects Agreements
 - Sporadically funded in IHS
 - 2001, 2002, 2005, 2007
 - Tribes construct facility
 - IHS provides
 - Staffing
 - Operations
 - 20 years minimum
 - Lake County JV project
 - Completed August 2009
 - 46 staff
 - \$4,491,000 staffing/operations annually
- Small Ambulatory Program Grants
 - Congress funds sporadically (2001, 2002, 2003, 2006, 2008)
 - IHS provides up to \$2.0 million for construction
 - Tribe owns and operates facility
 - Most successful program for California tribes
 - Mariposa \$312,816
 - Yreka \$750,000
 - Santa Ysabel \$809,000
 - Campo \$1,275,000
 - Shingle Springs \$2,000,000



Budget Formulation - Next Steps

- ❑ Complete and submit the FY 2014 Budget Worksheet by budget line
- ❑ Determine where to allocate the top 5 budget increases in rank order and amount
- ❑ Determine the top 3 budget decreases in rank order and amounts (i.e. where budget cuts could be taken and the impact.)
- ❑ Provide a narrative of items #2 and #3 above that describes and supports the agreed upon budget recommendation as well as justification of decreases
- ❑ Seek nominations for the alternate representative to serve with Chairman Stacy Dixon on the National Budget Workgroup; nominations of current, duly-elected tribal officials must be in writing, include a brief biography and have the permission of the nominee



Budget Formulation - Next Steps

- Seek nominations for the alternate representative to serve with Chairman Stacy Dixon on the National Budget Workgroup; nominations of current, duly-elected tribal officials must be in writing, include a brief biography and have the permission of the nominee

Budget Formulation Workgroup Timeline

Date	Workgroup Activity
January 6, 2012	Area submissions due to IHS Headquarters
January 17, 2012	Technical Committee to review and edit the aggregate Area recommendations/rollup spreadsheets.
January 19, 2012	IHS Headquarters to send final aggregated Area recommendations/rollup spreadsheets to Area representatives.
January 25–27, 2012	January 25 (3pm – 5pm) – Training for new representatives to the budget formulation process. January 26 & 27 (2 full days) – IHS FY 2014 National Budget Formulation Work Session meeting in Phoenix, AZ
February, 2012 (day TBD)	Formal presentation of the recommendation and draft testimony to Dr. Roubideaux.
March 2012	HHS Budget Consultation meeting, Washington, DC
May 9–10, 2012	IHS Evaluation 2014 / Planning 2015 meeting in Albuquerque, NM

Budget Formulation- Worksheet

				Scenario I		Scenario II	
Indian Health Service		Cross Walk	Cross Walk	Proposed	Proposed	Proposed	Proposed
Area Health Priorities FY 2013		Priorities to	Priorities to	2014 Budget	2014 Budget	2014 Budget	2014 Budget
California Indian Health Service		2013 Budget	2013 Budget				
		% of \$700,000	\$700,000	% of \$758,469	\$758,469	% of \$758,469	\$758,469
		(\$ in Thousands)	(\$ in Thousands)	(\$ in Thousands)	(\$ in Thousands)	(\$ in Thousands)	(\$ in Thousands)
Rank	FY 2013						
	Health/Disease Priorities						
1	Contract Health Service (Pharmaceuticals)	40.1%	\$ 280,453	40.1%	\$ 303,878	0.0%	\$ -
2	Indian Health Care Improvement Fund (Pharmaceuticals)	14.5%	101,697	14.5%	110,191	0.0%	-
3	Obesity/Diabetes + Complications (Dialysis)	4.4%	30,557	4.4%	33,109	0.0%	-
4	Behavior Health (Substance Abuse, Suicide Prevention, Domestic Violence, Depression) Note: \$16,067 mental hlth + \$22,103 alcohol	5.5%	38,170	5.5%	41,358	0.0%	-
5	Cancer						
6	Health Disease	3.4%	24,096	3.4%	26,109	0.0%	-
7	Dental	3.6%	25,000	3.6%	27,088	0.0%	-
8							
9							
10	Critical Priorities (there are 2 first priorities)						
11	Water/Sanitation Project Maintenance & Improvement	5.3%	36,955	5.3%	40,042	0.0%	-
12	HFC Priority System Area Distribution (HFC -Ambulance Program)	8.0%	56,102	8.0%	60,788	0.0%	-
13	Small Ambulatory (Recommendation: \$8 to \$10 million allocated per project)	0.4%	2,831	0.4%	3,067	0.0%	-
14	Injury Prevention	0.9%	6,039	0.9%	6,543	0.0%	-
15							
16	HFC = Health Facilities Construction						
	Other Activities						
	North and South YRTC	5.7%	40,000	5.7%	43,341	0.0%	-
	Urban	0.3%	2,000	0.3%	2,167	0.0%	-
	Current Services - Pay, Inflation, Pop Growth	8.0%	56,100	8.0%	60,786	0.0%	-
	Total	100%	\$ 700,000	100%	\$ 758,469	0%	\$ -

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