



Tribal Health Systems In Wisconsin Innovation & Collaboration

The Great Lakes Inter Tribal Council

Glen Safford, MA (HSA), MSSW

Deputy Director of Indian Health Programs



Introduction

- ❖ “Typical” Tribal Healthcare System in Wisconsin
- ❖ What Makes Them Special
 - Tribally Operated (PL 93-638)
 - As opposed to I.H.S. Direct Care
 - Staff Answerable to Councils/Health Boards
 - Combine Professional and Consumer Perspectives
 - Strategic Planning
 - Comprehensive/Multi-Disciplinary Sites
 - Prevention & Education Stressed
 - Broad Definition of “Health Care”



Introduction

- ◆ Typical History
 - Prior to 1955 - Need for change
 - 1955-1972 - Separation from BIA
 - 1972-1978 – Rhinelander Office and Local Boards
 - 1979-1990 - Impact of Indian Self Determination Act
 - 1990's-Present – Tightening Funding
 - Common Approaches



Introduction (cont)

- ◆ Complexity
 - Multi-Service
 - Multiple Funding Services
 - Small Health Administrative Staff
 - Health Boards & Councils & Workload/Sovereignty
 - I.H.S. Downsizing & Role
 - Multiple Meetings/External Environment

Introduction (cont)

- ◆ PL 93-638

- Sec. 2

- (1) The prolonged Federal domination of Indian service programs has served to retard rather than enhance the progress of Indian people and their communities by depriving Indians of the full opportunity to develop leadership skills crucial to the realization of self-government and has denied to the Indian people an effective voice in the planning and implementation of programs for the benefit of Indians which are responsive to the true needs of Indian communities



Rapid Change

- ◆ Sources of Change
 - 1990's & Tightening of Funding
 - “One DHHS” Initiative
 - Interests of Private Systems
 - State Coordination
 - I.H.S. Area Office
 - University/Colleges



Rapid Change (cont)

- ◆ Budget
 - \$3 Billion versus \$7.4 Billion
 - BAO lowest LON
 - Three-fold Comparison
 - 93 – 97
 - 98 Study



Rapid Change (cont)

- ◆ The Wisconsin Trap
 - People Returning
 - No I.H.S. Hospital
 - Smaller, More CHS – dependent Tribes



Response-Innovative Health Systems

◆ GLITC Mission

- Expanding self-determination efforts by providing services and assistance.
- To advocate for the improvement and unity of tribal governments, communities, and individuals.
- Deep respect for tribal sovereignty and reservation community values



Response-Innovation (cont)

- ◆ Wisconsin Tribal Health Director's Association
 - Mission Statement
 - Provide a framework for mutual support that encourages tribal, intertribal, and interagency collaboration, coordination, and communication
 - To assure comprehensive, quality health care

Response-Innovation (cont)

◆ Mission Statement GLITC-IHSP

- Raising the health status of American Indian and Alaskan Natives to the highest level possible through:
 - Supporting and enhancing American Indian Programs
 - Providing technical assistance, linking resources, and developing opportunities with Tribes through assessment, evaluation, and continuous quality improvements
 - Serving as an advocate in self-determination



Earlier Services- Initial Response



- ◆ General Advocacy
 - Descriptive Materials
 - Analysis
 - I.H.S. Strategic Planning Input
 - Public Health Roundtable (I.H.S./CDC)
 - I.H.S. Headquarters Re-structuring



Earlier Services- Initial Responses (cont)

- ◆ State Level Advocacy
 - Medicaid Managed Care
 - Outstationed Benefit Counselors
 - Cost Reporting Training
 - Tribal Affairs Unit
 - Wisconsin Alliance on Indian Health
 - Educational Sessions
 - 2010 Implementation Planning
 - Model Public Health Act
 - Minority Health Input/Coordination



Earlier Services-Initial Response (cont)

- ◆ Local TA to Improve Revenue and Expenses/Business Functions
 - Cross-Training
 - Business Supervisory Role
 - Data Entry Timelines
 - Updating Charges/Superbills
 - Managing Accounts Receivable and Collection Policies
 - New Services – C/B
 - CHS's Management
 - Pharmacy/Lab



Earlier Services/Initial Responses (cont)

- ◆ TA to Improve Training and Education
- ◆ Facilitating Planning
- ◆ Monitoring and Evaluation (ex. Pre-Accreditation Review)



New Linkages and Programs

- ◆ Epi Center Expansion (Awards)
- ◆ UW System
 - WIM
 - Health Coordinator
 - CQI
 - MD/Clinician Training
 - NARCH
 - Student Development (WIEA)
 - Blue Cross-Blue Shield



New Linkage and Programs (cont)

- ◆ Private Linkage (Ministry)
 - MOA
 - Cultural Sensitivity
 - Nursing Education
 - Circle of Excellence Award



New Linkage and Programs (cont)

- ◆ Emergency Preparedness/Incidents
 - Dwayne Jarman - EPC
 - Derek Moore – Surveillance
 - Tessie Poupart – Support
 - Functional Areas