

## IHS Model Agreement CY 2017 - Annual Report

A contract was entered into by the Bay Mills Indian Community and the U.S. Department of Health and Human Services; Indian Health Service.

### The following Programs, Functions, Services and Activities were Performed:

- A. **Health Management:** Provide overall administrative services for Tribal Health and Human Services Programs. Services included overall supervision, coordination, management, and monitoring of all Tribal Health and Human Services Programs. Approximately \$367,380 was expended on administration related activities.

During the CY 2017, there was about a 4% staff turnover including key positions such as, 2 Dentists, HRSA Coordinator, and Patient Education Specialist. BMIC/BMHC applied for HRSA Community Health Center Funding. Funding was awarded for a three year funding cycle, however, the money was only guaranteed until 2017. Currently we are waiting on the Health Center Funding to be passed for 2018 to receive funding or face a 70% reduction of an estimated loss of \$1,000,000. In 2016 we were awarded the Indian Health Service Special Diabetes Program for Indians, for 2018 we are receiving 25% of the initial award. This is also contingent on Congress. In addition, we were awarded more funding for HRSA AIMS Supplemental and Quality Insurance incentives. We have implemented automated texting patient appointment reminder in medical and pharmacy. Bay Mills hired a Traditional Healer that came in once per month in 2017. In 2018 the Traditional Healer will be in the community two times per month. We have contracted with War Memorial Hospital to provide psychiatry 8 hours per week.

- B. **Primary Medical and Dental Services:** A full time ambulatory clinic was operated to provide medical and dental care to eligible individuals. Routine medical and dental care was provided with an emphasis placed on preventive care with a total of 3 FTEs in medical and two FTEs in 2017. In March 2017 two dental providers left breeching contract. We hired a second dentist in July 2017. We are currently looking to fill the third positon.

Services were also available to non-Native Americans on Fee for Service and Value Base Care. Efforts were made to capture all possible third party revenue. Revenue generated by clinic services is reprogrammed into clinic services. The Bay Mills Health Clinic was staffed in accordance with tribal priorities, availability of funds and demand for services.

In 2017, the Medical Clinic served 1,876 patients with 7,790 patient visits. The Dental Clinic served 1909 patients with 4,612 visits.

The Health Center maintains accreditation through the Joint Commission in Ambulatory Health Care, Behavioral Health Care and Primary Care Medical Home and in 2017 had a successful site visit.

Approximately \$3 million was received during 2017 for medical, dental and behavioral health services through third party billing.

- C. **Purchased/Referred Care (PRC):** In order to provide comprehensive health services to eligible individuals, a Purchased/Referred Care Program was maintained. Health services as defined in this section may be purchased through other health providers when the Bay Mills Health Clinic cannot provide such services. Purchased health services may include hospital, specialized physician and dental care, pharmacy, optometry, and patient transportation. The BMHC does not pay for any service that can be provided on site for Tribal Members, unless approved by the Health Board. Services procured will be in accordance with IHS regulations and tribal priorities, which will be determined by the Health Board annually on the basis of need and availability of funds. Approximately \$1,050,673 was expended for PRC purchased services, including \$325,178 in prescription purchases for tribal members at the Health Center Pharmacy.
- D. **Substance Abuses Services:** Substance abuse services were provided to eligible individuals and consists of outpatient counseling, relapse prevention, youth prevention and referral services. Emphasis will be placed on prevention services. The Access to Recovery Program was proposed to end September 30, 2017, but will have continuation funding until May 2018. This program allows for case management for this population, but BMHC will continue to support this program as funding permits. This will allow the Substance Abuse Program to continue case management for eligible clients. Program administration will focus on quality of care and continued services. The Substance Abuse Program served 189 clients, totaling 1,101 visits in 2017. The increased numbers of visits reflect group therapy that occurs three times per week.
- E. **Mental Health Services:** Mental health services consisting of outpatient therapy, psychological testing and counseling, family therapy, play therapy, prevention and outreach will be available to eligible individuals. The full time Behavioral Health Coordinator under the HRSA Community Health Center grant funds worked closely with our medical clinic staff to integrate behavioral health and primary care. The Behavioral Health Program has achieved on going accreditation through the Joint Commission for 36 months. A site visit will occurred unannounced in 2017. Behavioral Health staff provided services to 218 clients, totaling 1695 visits in 2017.
- F. **Community Health Services:** Community health services consisted of educational programs focusing on prevention and healthy behavior and targeted at the entire community. Programs and activities will be provided to the community through outreach and home based services. Programming included community health representative and public health nursing. Additional funding was obtained to provide outreach services.
- G. **Pharmacy:** On-site pharmacy services were provided to the Native American and non--Native American patients of the Health Center. PRC funding was used to pay for pharmaceuticals for Native American patients while fees were charged to non-Native Americans Bay Mills Health Center Pharmacy offers 340 B, discounted prescriptions. Approximately \$1.5 million in sales were generated by pharmacy services for 2017.
- H. **Environmental Health Program (Sanitarian):** Field Environmental Health Sanitarian Services are provided in accordance with IHS criteria through a subcontract arrangement with Inter-Tribal Council of Michigan. These services provide for various inspections/surveys of tribal facilities and training.

Copies of these inspections may be viewed in health administrative offices. The total of this contract was \$38,000.

- I. Emergency Medical Services: Twenty four hour emergency medical services are available including advanced life support.
- J. Targeted Case Management for Direct Services: for PFSA's identified above.

Funding Amounts Available in Fiscal Year 2017 was \$2,765,334.

Submitted by:

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