

**Responses to Questions from Rep. Westerman for Hon. Jarred-Michael Erickson,
Chairman, Confederated Tribes of the Colville Reservation**

1. Please further elaborate on your answer and document further stories about instances of tribal members being referred to collection agencies because IHS did not pay provider bills.

ANSWER: As noted in my written testimony, for the past three years we have seen a spike in instances where tribal members have received notices from collection agencies for unpaid bills for services tribal members receive from private medical providers under the Purchased/Referred Care program (PRC). As the Committee is aware, under the PRC program, the Indian Health Service (IHS) contracts with private medical providers to enable patients to receive care from those providers that IHS is unable to provide.

The PRC program is carried out through arrangements between IHS and private health providers. For PRC patients in the Colville Service Unit, IHS is responsible for ensuring that these private providers are paid, not tribal employees. As such, when individual patients receive collection notices, this means that IHS has failed to do the administrative work necessary to ensure those providers are paid in a timely manner. Because the contractual arrangement for PRC is between IHS and the health provider, the Colville Tribes questions why Colville tribal patients—and not IHS—are receiving collection notices in any event.

2. Please further elaborate on the issues regarding recruitment and retention of health providers.

ANSWER: The Colville Service Unit serves a rural area with limited housing options. It shares the challenges that other rural health care providers have in attracting and retaining health providers. The Colville Tribes has, on its own, worked to establish housing for professional staff and medical providers in communities on the Colville Reservation. IHS has funding available for staffing quarters but, based on our experience, IHS has been reticent to share details of how that funding is allocated or how Service Units can utilize it.

a. How would advance appropriations prevent the kind of disruptions the Colville Service Unit has experienced in trying to hire providers?

ANSWER: If IHS were to be funded a year in advance, it would not have to stop administrative hiring processes, scheduling interviews, and other disruptions associated with government shutdowns.

b. What ideas or thoughts do you have on how IHS can improve recruitment and retention generally?

ANSWER: As noted in my written testimony, IHS should establish a residency program for medical students to locate them in rural areas. IHS currently does not have its own residency program. Studies and data have shown that doctors are much more likely to permanently locate in areas where they train.