



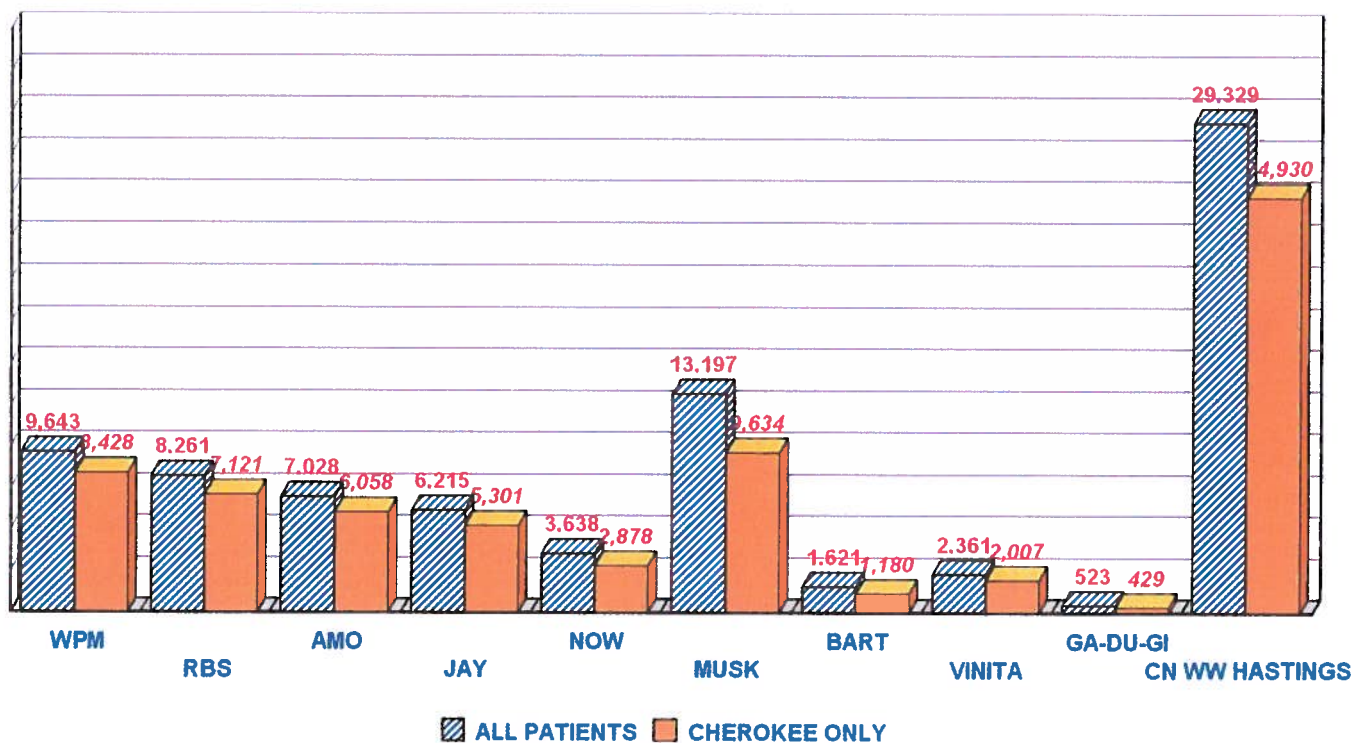
Cherokee Nation Tribal Council Health Committee report

Report by: Connie Davis, Executive Director Health Services
Connie-Davis@cherokee.org

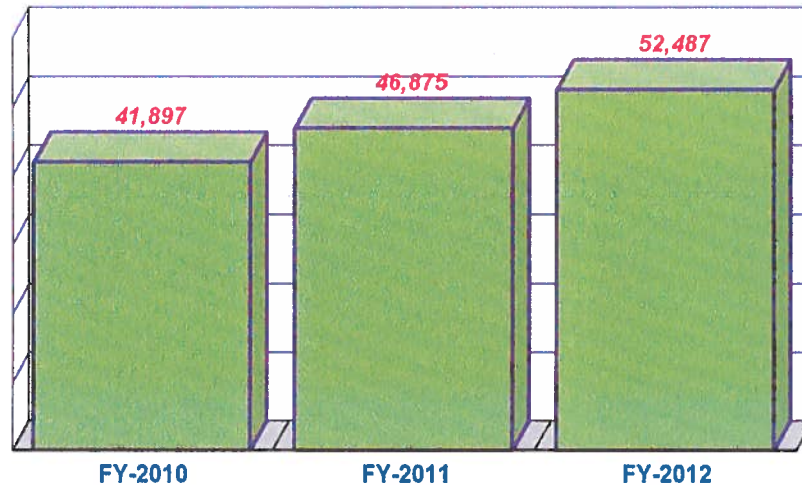
Month/Year of the report: October, 2012
Phone number 453-5557

CHARTS

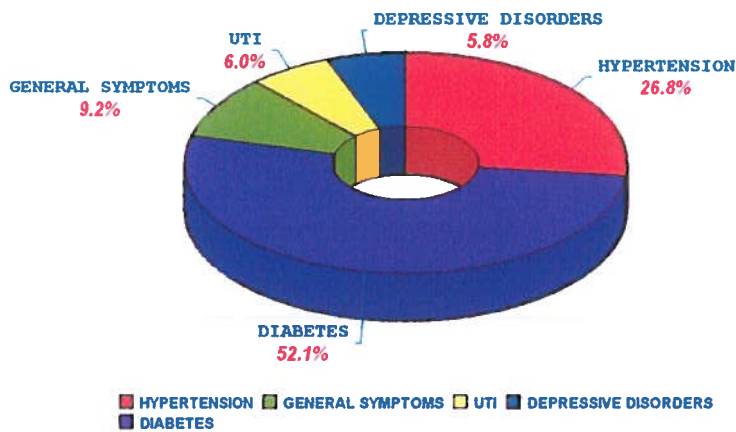
AMBULATORY PATIENTS VISITS BY CLINIC, SEPTEMBER 2012



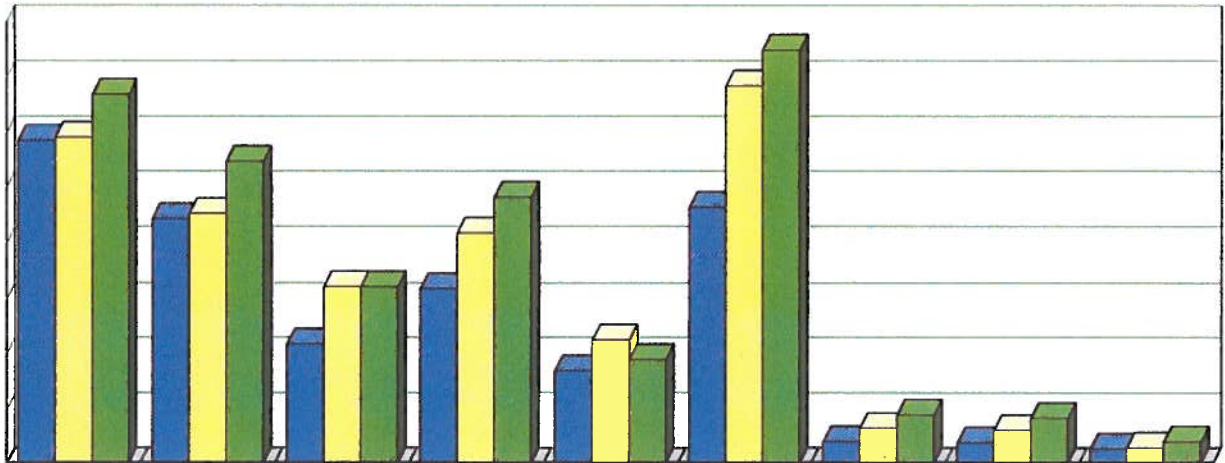
TOTAL AMBULATORY PATIENTS VISITS BY CLINIC, SEPTEMBER 2012



TOP FIVE AMBULATORY CARE DIAGNOSIS FOR CNHSG, SEPTEMBER 2012

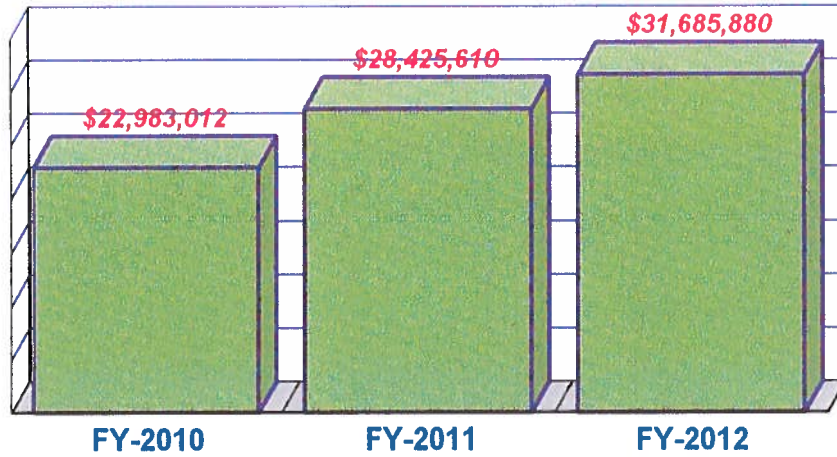


Third Party Revenue By Clinic, SEPTEMBER 2012 (YEAR TO-DATE)

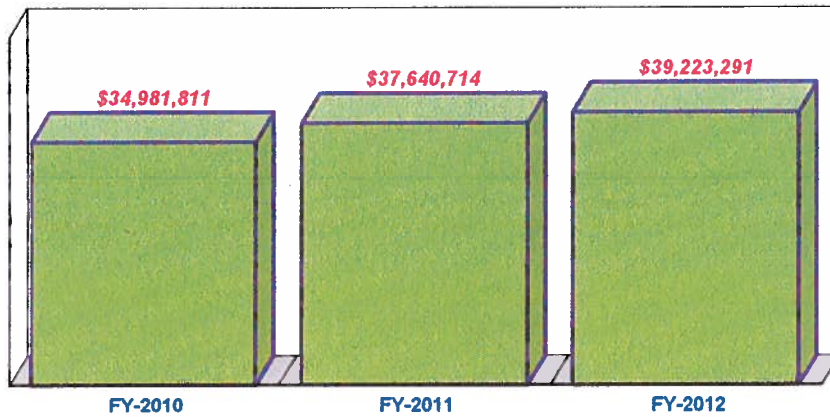


	WPM	RBS	JAY	AMO	NOW	MUSK	BART	VINITA	GA-DU-GI
FY2010	\$5,838,290	\$4,428,946	\$2,173,475	\$3,176,023	\$1,685,249	\$4,633,888	\$392,295	\$381,416	\$273,430
FY-2011	\$5,894,374	\$4,522,417	\$3,213,048	\$4,168,849	\$2,253,430	\$6,836,334	\$652,401	\$604,020	\$280,737
FY-2012	\$6,676,060	\$5,482,415	\$3,221,049	\$4,812,941	\$1,892,783	\$7,478,402	\$893,747	\$830,496	\$397,987

TOTAL THIRD PARTY COLLECTIONS CN-CLINICS ONLY(YEAR TO DATE)



TOTAL THIRD PARTY COLLECTIONS HASTINGS HOSPITAL ONLY(YEAR TO DATE)



Reports from Senior Program Directors:

Report from Lisa Pivec, Director of Community Health Promotion– September 2012

Legacy Foundation has provided a fully-funded training for all Healthy Nation staff to do strategic planning. Program is working on comprehensive tobacco control policy and healthy eating and active living. Staff is working with Commerce and Natural Resources to develop coordinated food access efforts for healthy food.

Report from Dr. BJ Boyd, Director of Behavioral Health Services– September 2012

- CN-BHS program was awarded a Project LAUNCH grant from SAMHSA. \$850,000 per year for 4 years to focus on early screening and intervention on children's mental health issues.
- The Oklahoma Drug and Alcohol Professional Counselor Association have announced Cherokee Nation Behavioral Health Prevention Programs as recipient of the "Outstanding Agency of the Year" award. John Scroggins (retired BHS employee) received "Counselor of the Year".

Report from Rhonda Cochran, Regional Clinic Director– September 2012

- Rhonda Cochran was the coordinator for the Arts and Crafts on the Courthouse Square during the Cherokee Nation Holiday.
- Rhonda and Jean Davis RN, Infection Control Nurse, started the first combined meeting with Infection Control Nurses and Housekeeping in an effort to streamline communication and improve infection control in the health centers.
- Rhonda accompanied Connie Davis and Dr. Roger Montgomery to Three Rivers Health Center for an informative lunch regarding the health center.
- Rhonda met with the design team and Redbird Smith Health Center Leadership to begin design of the remodeled clinic.

Office of Health Professional Recruitment and Retention Monthly Activity for October 2012

New Providers Starting in October:

- Melinda Greer, MD (10/1) – Hastings, Pediatrics
- Scotty Black, PharmD (10/1) – Hastings, Pharmacy
- Amanda Whytal, DO (10/1) – Hastings, OB/GYN
- Lucinda Sparks, CNM (10/15) – Hastings, OB/GYN
- Kimberly Mulanax, APRN (10/29) – Vinita, Behavioral Health
- Tasha Sandersfield, APRN (10/29) – Three Rivers, Advanced Practitioner

W.W. Hastings Hospital –

- ER Physician – two interested candidates – McKaila Allcorn, DO interviewed 9/27
- ER Physician – Dr. Joe Sagely resignation effective 11/16/2012
- Certified Nurse Midwife – Lucinda Sparks effective 10/15/2012
- Family Medicine – Beth Harp, DO has signed letter of intent for 8/2013
- Family Medicine – John Miller, DO has signed letter of intent for 8/2013
- CRNA – Commissioned Corp candidate visit scheduled for 10/22/2012
 - Dr. Matthew Wiley completing paperwork to moonlight in anesthesiology
- Urgent Care, Advanced Practitioner – Stephen Richards, PA completing paperwork to be PRN provider, with possibility to R/FT
- Radiologist – Phone interview with Dr. John Morelli completed, a site visit is planned for 10/23/2012.
- Dentist (Oral Surgeon) - Vacancy posted with Oklahoma Dental Association. Two candidates declined. One interested candidate pending the submission of CV

- Dentist (Periodontist) – To be vacated by Dr. Eric Jankowski. Dr. William Stenberg to replace effective 6/1/2013
- Pharmacist – Linzi Allen, PharmD start date 11/5/2012
- Health Partners – Stanley Gahring, MD – Processed to Credentialing and HR with effective date of 10/29/2012
- Health Partners – Charles Lutton, MD – Processed to Credentialing and HR with effective date of 10/29/2012
- PRN/Physician – Fred Ruefer, MD – Pending approval from Health Administration before processing
- Psychiatrist – Recruitment on-going

A-Mo Health Center –

- Physician – Dr. Michael Sammer interview 10/9/2012
- Dentist – Vacated by Dr. Regan effective 10/30/2012 – entering into private practice

Bartlesville Health Clinic – No Vacancies

Redbird- Smith Health Center –

- Physician – Interview with Dr. Edith Lubin 10/3/2012

Sam Hider Health Center –

- Dentist – Recruitment on-going; recruitment office attending dental recruitment fair. Interested candidate unable to obtain Oklahoma License before start date.

Three Rivers Health Center –

- Advanced Practitioner – Tasha Sandersfield, APRN effective 10/29/2012
- Advanced Practitioner – Conversion of Physical Therapy position

Vinita Health Center –

- Physician – Dr. Loni Pearish interviewed; coming on PRN, R/FT employment to be considered. Completes residency 2013
- Physician – Dr. Cohen provided CV; pending site visit and review of compensation
- Physician – Recruitment on-going
- Physician – Recruitment on-going
- Dentist – Recruitment on-going; recruitment office attending dental recruitment fair.
- Pharmacist – Position to be added second half of FY13
- Behavioral Health Advanced Practitioner – Kimberley Mulanax, APRN to start 10/29/2012
- Physical Therapist – Position to be added second half of FY13

Will Rogers Health Center –

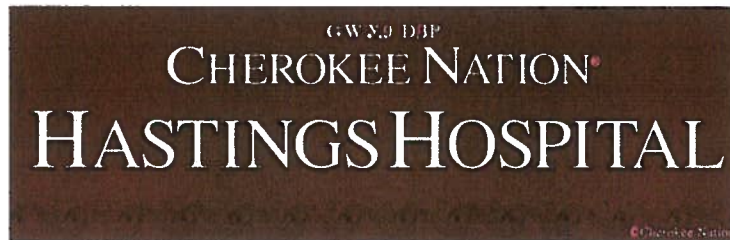
Physician – Dr. Clint Beeson to start 11/5/2012

Wilma P. Mankiller Health Center –

- Physician – Dr. James Johnston resignation effective 11/30/2012

Recruitment Barriers –

- Finalization of a competitive compensation package
- Recruitment Office staff shortage – Selecting, hiring and transition of two staff added to FY13 budget



100 South Bliss Avenue, Tahlequah, OK 74464
918-458-3100

Memorandum

To: Connie Davis

cc: Sohail Kahn

From: Brian Hail

Date: October 12, 2012

Subject: September 2012 Executive Summary for W.W. Hastings Hospital

During September 2012, Cherokee Nation W.W. Hastings Hospital (CNWWH) performed 292 surgical procedures and provided care for 1,638 emergency patients.

On September 7, 2012, we received notice from the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA) that our Surgical Technologist Training Program at CNWWH has been approved to train six students in each class. Mitch Thornbrugh, Patti Sumner and Tommy Hays are to be commended for yet another significant advancement in our training program.

Due to a great deal of gum on our sidewalks, we had a vendor come in to clean the gum from the sidewalks utilizing a commercial pressure washer; this was to little avail and we are going to pursue purchasing our own pressure washer capable of generating the pressure required to remove the gum.

New equipment and medical supplies were purchased to facilitate performance of Vertical Sleeve Gastrectomy at CNWWH by Dr. Baluh; the procedure is intended to provide weight loss for the obese patient with reduced surgical risk for the patient by removing 70 to 80 percent of the stomach (*the portion removed is a key producer of grehlin, a hormone responsible for stimulating hunger*) without intestinal bypass or implantation of a device.

On September 6, 2012, I met with Dr. Marvita McGuire from the Northeastern State University Medical Technology program to discuss our hosting Medical Technologist students at CNWWH; the intent is to enhance our ability to recruit Medical Technologists to Cherokee Nation from students that reside in our area.

As part of our effort to provide an excellent patient experience, we met with Kelly Ferguson from CNE to discuss incorporating their service philosophy of "Exceeding Expectations" at CNWWH and we are going to begin providing guest service training to our staff utilizing their service philosophy.

From September 24th to 27th, I attended the National Indian Health Board (NIHB) meeting in Denver, Colorado; during this meeting, I also attended the NIHB's Award Gala to receive the Local Impact Award for the achievements of our Intensive Diabetes Monitoring Service along with Carl Coats, Phar.D. An executive summary of the meeting has been provided for your review.

On September 26, 2012, I was advised by Jonathan Merrell that he is resigning his position as Performance Improvement Officer at CNWWH to pursue an opportunity with a national electronic health record firm.

CN WW Hastings Hospital Dental Health Services Report– Stephen Jones Senior Dental Director–September 2012

For the month of September 2012 Cherokee Nation Dental Clinics report the following:

- 960 New Patient Exams – These are exams for patients that are new to our system or have been previously treated and completed and are returning for a check-up.
- 2,147 Emergent Care Patients Seen – These are patients seen for emergency care only.
- 362 Patient were completed – All treatment recommended by the dentist was completed.
- 68 Patients were referred for Dentures or Partials – (Fuel Tax Contact Services)
- 41 Patients were referred for Contracted services we could not provide. (Contract Health Funds)
- 250 Diabetic patients were identified and seen as a priority for Exams.
- 3,196 Sealants were placed on children – This is part of our prevention services.

Current Projects:

- 1 WW Hastings is now open from 7am to 6pm to be more accessible to patient care and open up more exam appointments.
- 2 Training and Preparing to open Vinita Dental Clinic. Still in progress
- 3 Currently working to improve the Billing and A/R process to facilitate the recovery of Medicaid and 3rd party payer sources. Still working to improve
- 4 We are currently working to coordinate the Headstart programs and Schools to get our Sealant program underway. We will be using portable equipment to go to schools in the Sallisaw area while Redbird Smith Clinic is closed. Still in progress
- 5 We are currently evaluating services provided at all our facilities so that we can develop a consistent scope of quality care we can offer to all our patients regardless of the community they live in. Though this we hope to not only identify where services are needed but also to extend the services provided.
- 6 Doing cost analysis on some more advances services to see if we can offer them in the future

Health Program reports–

- **Wilma P. Mankiller Health Center** – Providers and Nursing staff attended HIV/HepC training. Immunizations rates for children 0-27months is 86%. Ideal glycemic control is at 41% of diabetic patients. Cycle time tracking (toe in toe out, including the pharmacy) is 85 minutes. The customer satisfaction rate is 81%.
- **A-Mo - Salina Community Clinic** – Pharmacy is still operating out of trailer. PHN held community drive through Flu clinic. Immunizations rates for children 0-27months is 91%. Ideal glycemic control is at 47% of diabetic patients. Cycle time tracking (toe in toe out, including the pharmacy) is only 52 minutes. The customer satisfaction rate is 93%.
- **Redbird Smith Health Center** – Staff has settled into the RSHC Annex from the relocation from the main facility. All services are being offered in Sallisaw with the exception of Dental. HPDP is working part-time in Sallisaw and part-time in the Tahlequah HPDP Office. RSHC Nutrition and Radiology Staff are rotating days and working in the Muskogee Clinic. RSHC staff worked and participated in the Belfonte Community Meeting held at Belfonte School where blood pressure checks were performed, flu shots were given, and health education was distributed. Remediation of main facility has begun and continues. Redesign of the facility is in the process. We are looking for ways to increase patient care services. We have hired a locum provider 2 days a week for the month of October. Dr. Duke has begun seeing patients again (well women exams) one day a week and plans to continue to increase as things settle with the responsibilities of the move and the remodel. Immunizations rates for children 0-27moths is 87%. Ideal glycemic control is at 41% of diabetic patients. Cycle time tracking (toe in toe out, including the pharmacy) is not reported . The customer satisfaction rate is not reported.
- **Sam Hider Jay Clinic** –The clinic staff hosted prenatal classes, annual diabetes clinics, diabetic shoe clinic, CDIB registration, Mobile mammography. Immunizations rates for children 0-27months is 100%. Ideal glycemic control is at 45% of diabetic patients. Cycle time tracking (toe in toe out, including the pharmacy) is 93 minutes. The customer satisfaction rate is 85%.

- **Three Rivers Health Center** – Three Rivers Health Center IPC4 Team participated in Action Period Call. Connie Davis, Dr. Montgomery and Dr. Kruger met with Three Rivers Health Center leadership. Cindy Martin attended the Area Director’s Awards close out meeting at the Indian Health Care Resource Center. Dr. Jamie Evans and Lisa Woodworth continued with testing 12 hours at Three Rivers Health Center. CPCi kickoff meeting was held via webinar at TRHC. Interviews were conducted for a mid-level position to replace Matt Lee. We are in the process of recruitment for an additional mid-level and pharmacist for FY13. Immunization rate for children 0-27months is 90%. Ideal glycemic control is at 50% of diabetic patients. Cycle time tracking (toe in toe out, including the pharmacy) is 69 minutes. The customer satisfaction rate is 78%.
- **Will Rogers Health Center**– Immunizations rates for children 0-27moths is 75%. Ideal glycemic control is at 55%. Cycle time tracking (toe in toe out, including the pharmacy) is 69 minutes. The customer satisfaction rate is 89%.
- **Vinita Clinic** –Immunizations rates for children 0-27moths is NA. Ideal glycemic control is at NA . Cycle time tracking (toe in toe out, excluding the pharmacy) is NA. The customer satisfaction rate is NA.

CN W.W. Hastings Hospital– September report

Announcements–

- Beginning on October 1, 2012, Behavioral Health will be located at the Health Living Campus and may be reached at 918.207.4977. Providers located at Healthy Living include Dr. Moira Redcorn, D.O., Angela Phillips, ARNP, and our numerous psychologists, licensed therapists and Drug and Alcohol Counselors. Dr. Beach will continue working at CNWWH to serve as a consultant and liaison for medical and behavioral health providers.
- During our recent Flu Clinic, we provided 1,246 doses of influenza vaccine, 40 doses of pneumonia vaccine and 314 doses of Tdap vaccine to patients. This great success is due to the selfless teamwork between Pharmacy, Nursing and Patient Registration.
- Ultrasonography is being provided with a new examination table that will provide a safer and more comfortable experience for patients undergoing ultrasonography at CNWWH; the new examination table is also more ergonomic for the ultrasound technicians performing the exams.
- Phase Three of four planned phases for renovation of the Labor and Delivery has been completed. The final phase will begin upon delivery of headwalls for the new area; coordination of Phase Four is being orchestrated to minimize the disruption of the department’s operations.
- Dr. Misner, Pediatrician, began working on a full-time basis in September 2012 in our Pediatrics Clinic.

Achievements

- Ronnie Hendrickson, CEH, was recognized in the October 2012 issue of Executive Housekeeping Today and was featured on the cover of this leading industry magazine. Ronnie was profiled by the magazine and the story provides a great example of someone who started at an entry level position and has achieved great advancements within our organization. Ronnie has achieved his Certified Executive Housekeeper (CEH) designation through an intense educational program and is an active member of the Oklahoma Chapter of the International Executive Housekeeper Association.
- Kristi Lucht, a coding specialist in Health Information Management (HIM), achieved certification as a Coding Specialist from the American Association of Professional Coders; this is the gold standard for medical coding and indicates proficiency in medical coding as proven by a rigorous examination.
- Pharmacy Services at CNWWH was chosen to receive the 2012 National Indian Health Board (NIHB) Local Impact Award for their efforts in the Intensive Diabetes Monitoring Service (IDMS) which is a component of the Improving Patient Care (IPC) model. Carl Coats, Phar.D., attended the NIHB’s Award Gala to receive the Local Impact Award.
- Dr. Doug Nolan, D.O., was awarded the Physician of the Year recognition by the Rural Health Association of Oklahoma. Dr. Nolan was recognized for his many contributions to the improvement of rural health in our community and his ongoing efforts to provide medical education to medical students and residents.

Volume

- The Hastings Emergency Department treated 1,638 patients and experienced a Left Without Being Seen (LWOBS) rate of 3.8%, a significant improvement from August 2012; the established goal for our LWOBS rate is 2% and an ED Improvement Team has been established to work intensively on our patient flow to improve the

Length of Stay (LOS) and LWOBS for the ED. The average length of stay for an ED patient discharged home was 144 minutes in September, three minutes in excess of the 141 minute goal.

- Hastings Surgical Services performed 292 procedures in September and decreased the waiting list for a colonoscopy to 1,220 patients. The average turnover time for an operating room was 24.25 minutes for a major case and 12.4 minutes for a minor procedure; both these times are below the established goals of 30 and 20 minutes, respectively.
- Hastings revenue for FY 2012 from October 2011 to July 2012 is \$25,470,073.21 with \$12,017,396 of that revenue generated by outpatient services. Currently, our projected charges are \$39 million with is \$2 million in excess of our budgeted amount.
- **Diabetes program**– The Cherokee Nation Diabetes Program was presented the John Pipe Voices of Change Outcome Award for 2012 from the American Diabetes Association on September 26th at the National Indian Health Board Gala in Denver, CO. The mid-year report for the Special Diabetes Program for Indians (SDPI) Diabetes grant was submitted on September 14th. The final site visit for the AHRQ/ IHS Data Project was held on September 10th with Dr. Joan O’Connell from the University of Colorado School of Public Health and final conference call was held on September 24th. The annual meeting of the Wilma P. Mankiller Health Center Diabetes Advisory Committee was held September 18th to discuss and approve the annual plan. The annual meeting of the W.W. Hastings Diabetes Advisory Committee was held September 19th to discuss and approve the annual plan. The W.W. Hastings Quarterly Diabetes Meeting was held on September 19th. Staff as a group completed the Assessment of Chronic Illness Care (ACIC), a twice-yearly required measure for the SDPI Diabetes Grant, at five Cherokee Nation Health facilities in September: Sallisaw on September 11th; Nowata, September 13th; and Bartlesville, September 27th. 68 patients attended the Diabetes Self-Management Education classes in September.
- **IPC (Improving Patient Care Project)**– IPC webinars were held on September 4th and 25th and attended by staff from the 3 IPC 4 sites: Nowata, Muskogee, and Bartlesville. Dr. Jamie Evans from Three Rivers Health Center was a presenter on the call and reported on the PDSA they ran the day after returning from the Learning Session. The PDSA was run on a small-scale test of change with one provider team on extended hours at the Muskogee clinic. The Diabetes Program Director was contacted by the Division of Diabetes Treatment and Prevention to discuss ideas about how IPC change concepts might be utilized by SDPI grant programs.
- **Diabetes Prevention Program (DPP)** – Three staff attended the SDPI DP Grantee Meeting in Denver, CO Hosted 7th Annual DPP Retreat on September 22, 2012. 82 participants, friends, and family members joined us for boxing, zumba, basket weaving, and trail hikes. Coordinator attended NIHB with Cherokee Nation Diabetes Director to receive the ADA John Pipe Voices for Change Award for outcomes. Continued classes with 8 DPP participants in Sallisaw. Began classes with 2 DPP participants in Tahlequah. Recruitment total for the year is 44 participants. 20 from Sallisaw, 3 from Tahlequah, and 21 from Stilwell. Completed labs in Tahlequah for annual and half year assessments
- **Cancer Program** – The program served 310 women served (Clinical Breast Exam, Mammograms, Ultrasound, PAP smear, HPV testing, Colposcopy with biopsy) during the month of September at a cost of \$32,848. **Comprehensive Cancer Program (CCC program)** the program reached 255 people, educational presentations were given on Skin Cancer Awareness to diverse groups in the TJSA.
- **WIC program**– served 7,726 clients and spent \$391,894 on these services. The program also promotes Breastfeeding and it served 192 clients during September.
- **CN Emergency Medical Service**– handled **410 calls**, of those 171 required emergency transport, 102 were transferred. In addition program provided EMS training to 627 participants of those 324 were Native Americans.
- **Jack Brown Center**–The JBC currently has 20 residential clients and an additional 10 clients on the waiting list. Staff offered educational sessions though out tribal jurisdiction.
- **Pharmacy Services**– the program filled 132,699 prescriptions (an increase of 1% from last year) @ the cost of \$2,210,239.
- POS reporting is functioning again, total collections continue to go up due to Ivanne’s POS billing efforts. We collected \$1,338,720 during last month. POS/TriNet contract will need to be extended again as it is still under CN Legal review. Still no progress on contract agreements, Vinita will need to be added to the existing contract for correct billing.
- **Central Refill Center** – Refill center has become a central supply warehouse for items with low use and typically expire before usage is needed (Crash cart items). Jamie Tapp is working on a set of “Demo patients” to allow individual site ordering when needed. Process will save time, money and reduce waste associated with our low use and emergency box medications.

- **Sallisaw pharmacy** – Mold problems created an emergency need to relocate the entire facility, pharmacy was relocated with most of their current fixtures and back to work within 1 week of clinic closure. SP was relocated as well.
- Stilwell – experiencing high volumes and will need to be assessed for appropriate staffing.
- Jay - Monte decided SP robotics was best fit, purchase agreements submitted to health contracts.
- Salina – Remodel has been re-started, still an anticipated completion for CN facilities crew is November. Waiting on bids from Fixture vendor and completion of robotics agreements.

Updates through date of 10/08/2012 concerning Audiocare and recent problems:

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- Chart numbers are now required to use Audiocare doing away with need for SS number. Birthdate is needed for validation due to numerous duplicate chart numbers. A prompt to enter the pound sign was missing but has now been added.
- We will be adding the option allowing patients to speak to a pharmacy staff member during hours of operation while using Audiocare. As of 09/15/2012 this has been added to the system and all sites will offer an option to speak to a pharmacist.
- We will request individualized messages for each site; if accomplished this will allow relevant information to be communicated for each individual site....improving communication to our patients. Not currently possible with the AC system.
- We are looking into the possibility of a Cherokee Language option and ordering via the Internet or e-mail. Not possible at this time
- The current variance in phone systems will not allow for a unified call in number outside of the Audiocare toll free line for sites such as Sallisaw, Stilwell, and Jay. These sites have not been converted to the Cisco phone system.
- **Healthy Nation Program**– Healthy Nation participated in the health fair and the parade during the Cherokee National Holiday. We passed out more than 5,000 pieces of information about heart disease and the importance of proper nutrition and exercise. That was September though.
- The program hosted the **Healthy Communities for Healthy Tomorrow Action Institute**- Averaged 150 participants in attendance each day. The goal of the Action Institute was to Address Public Health Policy, Systems and Environmental Change in Tribal Communities. The objectives of the Action Institute included:
Encourage future collaboration on public health issues at the local, tribal and statewide levels.
Share and disseminate information about school and community health promotion strategies and action steps that have been implemented in the Cherokee Nation.
- **The Recreation center** located in Tahlequah now has **8,851 members**, total numbers of visits: **10,108**.
- **Dietary Services**- Reports that they **served 558 clients** during the month of September. The worksite activities included weight management classes, Lipid control classes, food exhibits and cooking demonstrations, creating diet menus for patients, nutritional therapy coverage, Cherokee youth shelter menu review and advice, SHS menu review and advice.
- **Staffing Summary**– Health services currently has 1,960 employees, of these 298 were Providers (129 PRN's). 2 provider vacancies were filled, there are 23 current provider vacancies.
- **Health Facilities**– Performed incoming biomedical inspections and Inventory Entry on New Equipment for Vinita Clinic. Met with Indian Health Services staff in Muskogee regarding biomedical processes. Prepared CAF packets for FY 2013 service agreements. Drafted letter to IHS requesting funds to assist in remediation efforts at RSHC, the IHS approved our request and we have received the funds. Completed pouring concrete slab, sidewalks, and drive ways for Three Rivers Health Center Storage Building - Framing package delivered to location. Redbird Smith Health Center our staff assisted with set-up of temporary modular units, which included electric service, sewer/holding tank service, building of ramps, work stations, cabinets, installation of shelving and move in assistance. Shrink wrapped dental equipment and dental cabinets at Redbird Smith Clinic. Removed all surplus items from the old Vinita clinic location and also delivered 80 cases of copy paper for the Vinita and Nowata Health Centers. Rearranged furniture for Health Administration at the main Complex. Moved Behavioral Health staff member from Hastings Hospital to Bill Willis Healthy Living Campus. Picked up all surplus items from Healthy Living Campus, Vinita Clinic and Hastings Hospital Relocated Exam Table from Vinita Clinic to the Bartlesville Clinic. Transported Digital Imager from to Hastings Hospital. Moved CR Reader from Three Rivers Health Center to Hastings Hospital. Moved PHN's equipment and supplies from Hastings Hospital to Bill Willis Healthy Living Campus. Made local confidential (HIPPA) recycle paper run. Followed up on a report of a snake inside building #3 Healthy Living Campus and repaired any entrance paths.

- **Contract Health Services**– the CHS program processed 5,267 referrals, of those 5,081(96.4%) were approved at the cost of \$2,892,476.
- **CHS Special funding initiative update**– The program was established as a result of passage of “Cherokee Nation Corporation Health Dividend Act of 2011 (Cherokee Code Annotated: Title 18, Article 3 § 18) which was amended in November 2011 to increase the amount of the monthly dividend from CNB profits from 30% annually to 35%. The additional 5% of the corporate dividend will be used exclusively to provide services to Cherokee Nation citizens living within the jurisdictional boundaries of the Cherokee Nation. The services covered include, but are not limited to, eyeglasses, dentures, prosthesis, cancer treatments and hearing aids. At present, the process of handling these claims are as follows:
 - Most of these referrals are termed “Call In’s”. These are emergent referrals where patient access health care services via an ambulance or an emergency room, bypassing the typical Indian Health Services route. Once we receive the request one of three outcomes are possible the referral can be **approved**, **deferred** pending further medical information or **denied**.
 - Referrals are deferred pending further medical information for a few reasons. For example, the medical information on these referrals is minimal due to the emergent nature of the situation.

CIH Review Summary – Sept, 2012						
Eligible	Approved		Pended		Denied	
	#	\$	#	\$	#	\$
135	96	92,542	37	424,280	2	1,050

Five % CNHS FUNDS DISTRIBUTION BY COMMUNITIES _SEPTEMBER 2012

