

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**STATEMENT OF**

**YVETTE ROUBIDEAUX, M.D., M.P.H., ACTING DIRECTOR**

**INDIAN HEALTH SERVICE**

**BEFORE THE**

**SENATE COMMITTEE ON INDIAN AFFAIRS**

**NOMINATION HEARING**

**FOR THE**

**DIRECTOR, INDIAN HEALTH SERVICE**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**June 12, 2013**

**STATEMENT OF YVETTE ROUBIDEAUX, M.D., M.P.H., NOMINEE TO BE  
DIRECTOR OF THE INDIAN HEALTH SERVICE**

Thank you, Madam Chairwoman, Vice Chairman Barrasso, and Members of the Senate Committee on Indian Affairs (Committee). I am Dr. Yvette Roubideaux, the Acting Director of the Indian Health Service. I am honored to appear before you today as President Obama's nominee to serve a second four-year term as Director of the Indian Health Service (IHS).

If confirmed, I look forward to working with you to continue our progress on improving health care for American Indians and Alaska Natives (AI/AN). In my confirmation testimony four years ago, I stated that we had a unique opportunity to begin the difficult work of restoring health and wellness to American Indian and Alaska Native communities. I talked about the significant and unique challenges we face, and that while reforming the IHS would take some time, I was ready to begin the important work of bringing change to the Indian Health Service.

I do believe that we have made progress in changing and improving the IHS, but it is clear that there is much more to do. That's why, if confirmed, I would be honored to serve another four years to continue that progress. While the challenges have been enormous, we have made progress that serves as a solid foundation for continued improvement.

This progress has been achieved in partnership with this Committee, and I am grateful for your support during the past four years. If confirmed, I look forward to working together with you on further progress.

Progress on the IHS budget has been critical to our progress in accomplishing our agency priorities and our work to change and improve the IHS. As I stated in the Committee's recent budget oversight hearing, if the FY 2014 President's budget is enacted, IHS appropriations will have increased by 32 percent since FY 2008. The appropriations increases received in the past few years are making a substantial difference in the quantity and quality of healthcare we are able to provide. However, it is clear that IHS continues to struggle to meet its mission with

available resources, and, if confirmed, I am committed to continuing to work with you on the IHS budget.

IHS has made considerable progress in addressing our agency priorities and reforms, and details are available in my testimony from the recent budget hearing. However, we still have much more to do. If confirmed, I plan to continue to strengthen our efforts to reform the IHS during the next four years by focusing on three main priority areas.

First, I plan to strengthen our partnership with Tribes by continuing the improvements we have made in our Tribal consultation process and by working with Tribes to make further improvements. Honoring the government-to-government relationship through meaningful consultation with the federally-recognized Tribes that we serve is an important IHS priority. We know we have more work to do to make this partnership stronger.

Second, I plan to continue our priority to reform the IHS. This includes our focus on making sure that the patients we serve benefit from the new provisions in the Affordable Care Act and the reauthorization of the Indian Health Care Improvement Act. We will also continue working in partnership with Tribes on education and outreach to Tribal communities.

I also plan to continue our internal IHS organizational and administrative reforms. While we have made significant improvements in budget planning, financial management, performance management, more consistent business practices throughout the agency, and system-wide accountability for progress on agency reforms, there is much more to do. We must continue to find ways to operate more efficiently and effectively and maintain our efforts to be good stewards of federal resources.

IHS has responded with corrective actions to the findings of the Senate Committee on Indian Affairs investigation of the Aberdeen Area, and we have conducted reviews in all other IHS Areas. We plan to continue progress in ensuring all of the corrective actions are implemented consistently across all IHS Areas.



Third, I plan to continue our focus on our priority to improve the quality of and access to care with a continued emphasis on customer service and several quality improvement strategies including establishment of a patient centered medical home model within the Indian health system. This model, already implemented in 127 of our IHS, Tribal and Urban Indian health programs, is helping us make improvements such as reduced waiting times, better coordination of care, quicker scheduling of appointments, better continuity of care, and improvements in quality measures.

Our focus on specific agency priorities has helped us make progress on our outcomes. In 2011, the Indian Health Service successfully met all national Government Performance and Results Act (GPRA) clinical performance indicators, an accomplishment never before achieved by the IHS. Our system-wide focus on quality improvement has, for example, helped increase receipt of mammograms from the low 40 percent range to over 50 percent last year. The Special Diabetes Program for Indians has also resulted in improved access to quality diabetes care, and has helped to reduce diabetes complications such as end-stage renal disease. All of these efforts will contribute to our ultimate outcome of reducing health disparities for the patients we serve. Even with this progress, we still have much more to do.

One of the most significant challenges we face is the current and potential future impact of sequestration on IHS. Tribes have expressed their concern and disappointment that our recent progress on the budget is being reduced by having to absorb the cuts from sequestration. However, if the FY 2014 President's Budget Request is passed, our budget will continue to grow and sequestration would be eliminated.

While we continue to face enormous challenges, if confirmed, I will continue to fight as hard as possible to change and improve the IHS. The job of the IHS Director is certainly difficult, but my enthusiasm to continue to change and improve the IHS has not waived, especially since I know the patients and the Tribes we serve are depending on us to continue this progress. IHS has the solemn responsibility to honor the federal trust responsibility to provide health care, and we know that we have much more to do to ensure that our AI/AN patients and communities receive the quality health care that they need and deserve.