

SOUTH DAKOTA STATE MEDICAL ASSOCIATION  
POLICY

Subject: Indian Health Services and Funding

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POLICY STATEMENT

The United States Government has a treaty obligation to provide healthcare to American Indians, and the State of South Dakota has long argued that services provided to individuals eligible for both Medicaid and IHS should be eligible for 100 percent federal funding whether provided directly by IHS or non-IHS providers. The policy of the SDSMA is to support the State of South Dakota in its efforts to secure reimbursement for services provided to Native Americans by non-Indian Health Service (IHS) providers.

This policy position also includes our support of Congress to enable IHS to meet its obligation to bring American Indian health up to the level of the general population. To do so, the SDSMA recommends the following:

1. Exploration with American Indian leaders of the possibility of increased number of nonfederal American Indian health centers under tribal sponsorship and/or contract;
2. Increased involvement of private practitioners and facilities in American Indian care, through such mechanisms as agreements with tribal leaders or IHS contract;
3. Improvement in transportation to make access to existing private care easier for the American Indian population; and

The SDSMA supports efforts to improve recruitment and retention of employees in IHS – specifically by:

- a. Offering incentives for recruitment and retention;
- b. Implementing a medical credentialing system;
- c. Providing liability protections for health professional volunteers at IHS;
- d. Improving hiring practices by removing hiring preferences and roadblocks that prevent the release or demotion of IHS employees due to poor performance and/or misconduct; and
- e. Incorporating standards to improve the quality and timeliness of care provided.

AUTHORITY

South Dakota State Medical Association Council of Physicians, 11/3/2017.