

CHICKASAW NATION: A SUCCESS STORY

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Chickasaw Nation expands health campus thanks to partnership with Indian Health Service

A focus on the quality of services and a commitment to excellence has led to the expansion of the Chickasaw Nation Medical Center in Ada, Oklahoma.

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By Betsy Barron

The Chickasaw Nation, headquartered in Ada, Oklahoma, is economically strong, culturally vibrant and full of energetic people dedicated to the preservation of family, community and heritage. The Chickasaw Nation was among the first of several Tribes to embark on Tribal Self-Governance beginning in 1994. Being Chickasaw myself, I was particularly excited to sit down with some of the brightest minds the tribe has to offer to better understand the ways in which Tribal Self-Governance combined with the Affordable Care Act/Indian Health Care Improvement Act (ACA/IHCIA) has made a positive impact for the Nation and advanced health care for its' citizens.

Melissa Gower, Senior Advisor & Policy Analyst, has seen the evolution of the Chickasaw Nation Medical System from its humble beginnings into the complex campus it has become today. "When we compacted (under Self-Governance) in 1994, it was a small, tiny hospital run by the Indian Health Service (IHS). Today, we have a medical center campus. It's amazing to go from this 'little bitty building' under IHS to what the tribe has today, a whole medical campus with a huge new hospital. The majority of our facilities have been built under the joint venture construction program because the tribe put up the money to do it. None of it would have been possible without Self-Governance."



The Chickasaw Nation Medical Campus today (Photo provided by the Chickasaw Nation)

In their research, the Chickasaw Nation learned that their average patient had to go to seven different health systems for care. The Nation is working to change that by creating a one-stop shop by prioritizing primary care and care coordination.

“From a public health perspective, when you broaden access to all primary care, things we all need, it really changes the healthcare landscape of the United States,” according to Dr. John Krueger, the Under Secretary of Medical Staff/Quality at the Chickasaw Nation Department of Health.

The Chickasaw Nation is focusing on building the ability to create choices in health care, rather than having patients participate in a model that makes choices for them. “We wanted to improve the health of our population, and it’s mainly a secondary opportunity for us,” shares Krueger.

In fact, the Chickasaw Nation is a leader in quality improvement. Self-Governance and the ACA/IHCIA has allowed room to improve the quality of their healthcare on their own terms, and it is working, because they’re winning awards. Some of the most tracked measures include years of life saved, hospital days averted, and cost. They recently won the prestigious Baldrige Award, a widely known honor which represents the best of the best in healthcare quality. The Baldrige Award is scarcely awarded to Tribal organizations, and winning it is no easy feat.



A “before” photo of Carl Albert Hospital (Photo provided by the Chickasaw Nation)

Despite challenges created by the COVID-19 pandemic, the Chickasaw Nation has made the most out of the new avenues of care delivery it has created. Gower notes that it has enhanced the healthcare delivery system because of the possibility of virtual visits. Even the possibility of continuing audio-only healthcare visits for those who do not have internet has increased access for their patients.

Additionally, the Chickasaw Nation Pharmacy Refill Center has expanded to providing medication for non-Native spouses and has increasingly employed more automation, meaning that pharmacists are now more able than ever to get hands on experience and get back to practicing and treating patients.

Executive Officer of Revenue Brenda Teel points out that Medicaid expansion under the ACA/IHCIA has been pivotal in allowing more flexibility in their model of healthcare. “Opportunities in the ACA/IHCIA combined with exercising our authorities under Self-Governance allows us to do all these things that we desperately need to do for our patients which otherwise would not be possible.”

When asked what one word of advice they would give to tribal leaders considering entering into Self-Governance, Lieutenant Governor Chris Anoatubby was quick to share that it is important to start small. “We didn’t just jump in to do everything all at once. Just take a line item or certain programs, don’t try to do it all. Just think through it, plan it, and you’ll know when it’s time or whether you want to. It takes time to build this. It took us time. It took time to get that third party revenue. It’s going to take time to build the foundation.”

Gower agreed, sharing that all you must do is start with one program/line item. Some Tribes start by assuming the Community Health Representatives (CHR) and health education programs under

their Self-Governance Agreements. “Just starting with those two [programs],” Gower states, “is a great way to get there.”

Marty Wafford, the Under Secretary of Support & Programs for the Chickasaw Nation Department of Health, noted that access, trainings, and their array of services has expanded greatly, contributing to the improved health of Chickasaw citizens. “We wouldn’t have what we have.” Further expanding on the point of self-sufficiency, Wafford added, “Our IHS funds are more like 40% of our budget because we are less dependent... that’s a very big deal for us.”

Melissa Gower expanded, “Self-reliance: that’s Self-Governance in action-- , because you’re self-reliant. You’re exercising your Tribal Sovereignty.”

