

INDIAN HEALTH SERVICE

The Indian Health Service (IHS) is the principal federal health care provider and health advocate for American Indian and Alaskan Natives (AI/AN) people. Its goal is to raise the health status of AI/AN peoples and their communities by providing a comprehensive health service delivery system to members of 566 federally recognized Tribes located across 36 U.S. States.

The IHS is Agency within and Operating Division of Department of Health and Human Services, and is responsible for providing federal health services to AI/AN people and communities. The provision of health services to members of federally-recognized tribes grew out of the special government-to-government relationship between the federal government and Indian tribes. This relationship, established in 1787, is based on Article I, Section 8 of the Constitution, and has been given form and substance by numerous treaties, laws, Supreme Court decisions, and Executive Orders.

- **Mission** Raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.
- **Goal** Assure that comprehensive, culturally acceptable personal and public health services are available and accessible to AI/AN people and communities.
- **Foundation** Uphold the Federal Government's obligation to promote healthy AI/AN people, communities, and cultures, and to honor and protect their inherent sovereign rights.

Compared to other Federal, State, local, private, and Tribal partners, the IHS has a relatively small and limited role in emergency and disaster preparedness, response, and recovery in Indian Country. That said, the IHS recognizes the importance of the role they serve, and strives to ensure the provision and continuity of health services to the AI/AN people and communities, regardless of conditions in the affected area. Likewise, the IHS is committed to improving the communication, integration, and coordination across all levels of emergency preparedness, response, and recovery.

The IHS responsibilities and support during emergencies and disasters in Indian Country generally falls into two broad categories; specifically, the pre and/or post phases pertaining to the issuance of a Federal disaster declaration by the President of the United States and/or a Public Health Emergency declaration by the Secretary of Health and Human Services.

- Prior to or in the absence of a Federal disaster and/or public health emergency declaration, the IHS Health Care System seeks to sustain capability and operations supporting the affected Tribal community so long as it remains necessary and beneficial, and does not place Tribal members and service providers at unacceptable risk.
- In anticipation of our response to a Federal disaster and/or public health emergency declaration, the IHS Health Care System will continue to provide support to the Tribal

community for as long as it is able to safely do so, and/or until such time as the broader State, Federal, local, or private response and recovery entities arrive to render aid; at which time, the IHS and/or Tribal health care providers will augment the larger medical response team(s), and/or serve in liaison roles to ensure that the external responding service providers entities deliver culturally appropriate and acceptable care to the affected Tribal members and community.

RESOURCES

The IHS Health Care System provides direct services, resources, and/or otherwise facilitates the delivery of therapeutic and preventive care, including clinical and preventive care, and environmental, educational, and outreach programs and activities to improve the health and well-being of AI/AN people and communities. The method of delivery of IHS provided health services is subject to sovereign and respective determination of each Tribe; and, may be provided directly by the IHS, through tribally contracted and operated health programs, and/or through services purchased from private providers.

- The IHS Federal direct service system currently includes: 28 hospitals; 61 health centers; 34 health stations; and, 34 urban Indian health projects that provide a variety of health and referral services.
- The IHS Federal clinical staff consists of approximately: 2590 nurses; 790 physicians; 660 pharmacists; 670 engineers/sanitarians; 330 physician assistants/nurse practitioners; and, 290 dentists. The IHS also employs various allied health professionals, such as nutritionists, health administrators, and medical records administrators.
- Statutory provisions of Public Law 93-638, as amended, provide for and enable the IHS to enter into compacts and contracts with Tribes who decide to manage their own health services. Through these types of agreements, AI/AN communities and corporations administer: 17 hospitals; 249 health centers; 70 health stations; and, 164 Alaskan village health clinics.

ADDITIONAL INFORMATION

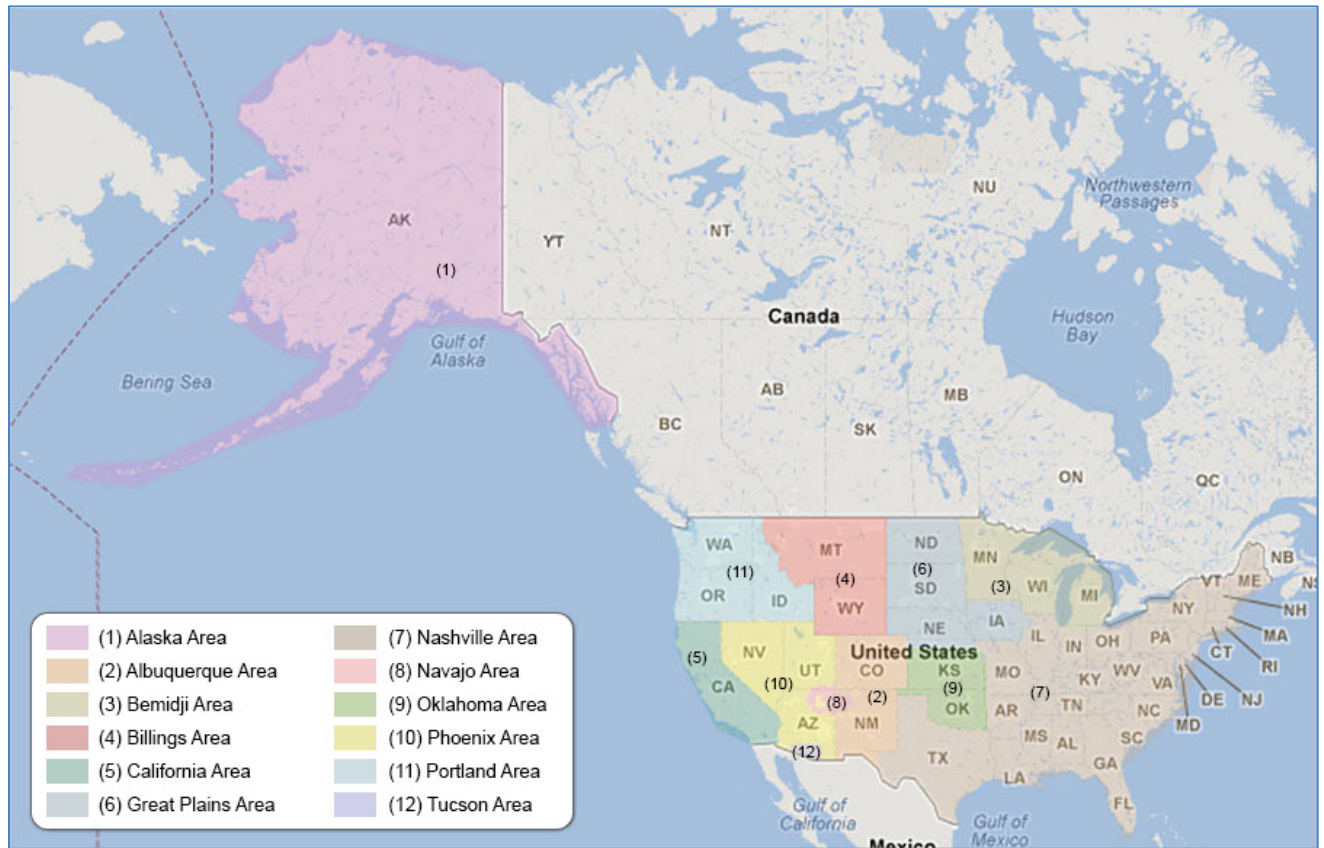
The IHS does not host a centralized emergency operations center. In the event of a localized or regional emergency, Federal, State, local, Tribal and NGO partners should contact the IHS as follows.

- Weekdays during normal business hours of 8:00am to 5:00pm [respective local time], contact the IHS Area Office for the respective U.S. State/Region indicated at Attachment-1.

- Weekdays outside of the above normal business hours, weekends and holidays, and at any other time in the absence of a response from the IHS Area Office indicated at Attachment-1, contact the IHS Lead Liaison HHS/ASPR Emergency Management/ Secretary’s Operations Center (SOC) at 301-443-1771.

The IHS website <http://www.ihs.gov> provides an abundance of information and resource links pertaining to the Agency. Additional general and administrative Agency information can be obtained from the IHS Public Affairs Staff at 301-443-3593.

ATTACHMENT – 1: INDIAN HEALTH SERVICE AREA OFFICE CONTACT INFORMATION



Last Updated: July 25, 2016

Area Offices

Listing	Phone	Web Site
Alaska (serves Alaska)	(907) 729-3686	http://www.ihs.gov/alaska/
Albuquerque (serves New Mexico, Colorado & Texas)	(505) 248-4534	http://www.ihs.gov/Albuquerque/
Bemidji (serves Indiana, Minnesota, Michigan & Wisconsin)	(218) 444-0458	http://www.ihs.gov/bemidji/
Billings (serves Montana & Wyoming)	(406) 247-7107	http://www.ihs.gov/billings/
California (serves California & Hawaii)	(916) 930-3927	http://www.ihs.gov/california/
Great Plains (serves North Dakota, South Dakota, Iowa & Nebraska)	(605) 226-7582	http://www.ihs.gov/greatplains/
Nashville (serves the Eastern United States)	(615) 467-1500	http://www.ihs.gov/nashville/
Navajo (serves Arizona, New Mexico & Utah)	(928) 871-5811	http://www.ihs.gov/navajo/
Oklahoma City (serves Oklahoma, Kansas & Texas)	(405) 951-3768	http://www.ihs.gov/oklahoma/
Phoenix (serves Arizona, California, Nevada & Utah)	(602) 364-5039	http://www.ihs.gov/phoenix/
Portland (serves Idaho, Oregon & Washington)	(503) 414-5555	http://www.ihs.gov/portland/
Tucson (serves Southern Arizona)	(520) 295-2405	http://www.ihs.gov/tucson/