

**TESTIMONY BEFORE THE
INTERIM
COMMITTEE ON HEALTH SERVICES
JANUARY 10, 2012**

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Chairman Lee and members of the Interim Health Services Committee:

Wilson Health Planning Cooperative

Named after Dr. Herbert Wilson, who was a physician on the Fort Berthold Reservation for 44 years, the Wilson Health Planning Cooperative was formed to study and design a new health care system in an 11-county area that includes the Fort Berthold Reservation. The included counties are Bottineau, Burke, Dunn, McHenry, McKenzie, McLean, Mercer, Mountrail, Pierce, Renville and Ward. The cooperative's two primary goals are: 1) to eliminate health care disparities in the region; and 2) to ensure longer, healthier lives for all residents.

Since 2008, the Wilson Cooperative has accomplished the following:

- a. **Literature research:** Health statistics were gathered and analyzed to gain an understanding of the health status of the residents of the 11-county region. The Cooperative discovered that of the roughly 115,000 people who live in this area, more than 12,000—or 12.5 percent—have no health insurance. Also, almost 17,808, or 16.2 percent, suffer from a disability and 11.2 percent live in poverty.
- b. **Health care facility site visits:** Wilson Cooperative members toured many of the health care facilities in the 11-county region to assess and inventory the health services available in the 11-county region.
- c. **Public meetings:** During the summer of 2008, members of the Wilson Health Planning Cooperative held 10 public meetings throughout the 11-county area. Participants shared their visions of an ideal health care system that: 1) is available to all; 2) is local; 3) has abundant providers; 4) is diverse; 5) is affordable; 6) is of high quality; 7) includes a strong family medicine component; 8) is efficient; 9) places emphasis on preventive care; 10) offers home health care and hospice care; 11) has a medical research component; 12) offers dental care; 13) has passionate providers; 14) is independent; and 15) provides seamless services through cooperative arrangements.
- d. **Appreciative Inquiry training:** The Wilson Cooperative planned and hosted two seminars on Appreciative Inquiry, a planning methodology that focuses on “what is working,” rather than “what is wrong.” Basically, when you focus on “what is wrong,” this is what you tend to perpetuate. The seminars were led by AI specialists from Case Western Reserve University's Weatherhead School of Management, where Appreciative Inquiry originated.
- e. **Health care system tours:** During December 2011, the Wilson Cooperative led a bus tour to Idaho and Washington to study and learn from national leaders in health care. The group,

which included tribal members, North Dakota legislators and health care providers, visited the Benewah Health & Wellness Center in Plummer, Idaho, where four participants learned how the Coeur d'Alene Tribe operates an integrated community health center. As the primary physician on the Fort Berthold Reservation for 43 years, Dr. Wilson was required to operate two clinics, treating IHS patients in one and non-Native patients in another. The Benewah Health Center treats Native American and non-Native patients in the same facility and charges a sliding scale fee based on the patient's income. The second site visit was in Seattle at the Group Health Cooperative's facilities. Group Health has more than 650,000 members and provides health care services directly to those members from clinics and hospitals it owns and operates. Group Health has been operational since 1947 and has been a leader in developing preventative health practices.

In 2011, the Wilson Cooperative helped the Three Affiliated Tribes apply for and receive an \$80,000 Community Health Center Planning Grant through the Health Resources and Services Administration of the U.S. Department of Health and Human Services. The purpose of these planning grants is to demonstrate the need for health services in the community and to plan for the development of a comprehensive Community Health Center under Section 330 of the Public Health Service Act. The purpose of the Health Center Program is to extend comprehensive primary and preventive health services (including mental health, substance abuse and oral health services) to populations currently without access to such services, and to improve the health status of local residents. The planning grant funds are used to conduct all of the planning activities associated with the development of a section 330 health center. They include:

- Conduct a comprehensive needs assessment
- Design an appropriate health care service delivery model, based on the comprehensive needs assessment
- Increase community involvement in the development and/or operational stages of a comprehensive health center
- Develop linkages/building partnerships with other providers in the community, including community health centers (FQHCs), health departments, local hospitals, and rural health clinics

The Fort Berthold Reservation is home to 6,341 people, according to the 2010 U.S. Census. Of this number, 4,556—or 72 percent—are American Indian. And 28 percent of those American Indians live in poverty. Those living in poverty are very familiar with the old adage, "Poverty leads to poor health; and poor health leads to poverty."

American Indian people have long experienced lower health status when compared with the U.S. general population. Nationally, average life expectancy for the Native American is 71.1 years, compared to 76.8 years for the U.S. general population. The life expectancy for the Native American living on the Fort Berthold Indian Reservation is even lower. Native Americans living in the Indian Health Service Aberdeen (S.D.) Service Area, which includes North Dakota, Nebraska and Iowa, is the lowest in the nation at 64.3 years, according to UND Center for Rural Health. The hard, unfair truth is that members of the Three Affiliated Tribes die 12.5 years earlier than those in the nation's general population. The health disparities don't end with years of life lost. A few more examples are cancer deaths, prevalence of diabetes and rates of suicide.

Northern Plains Indians, including those living on the Fort Berthold Reservation, are much more likely to die of cancer than the rest of Indian Country and the non-Native population. Between 1994 and

1998 a total of 291.7 per 100,000 of Indian population died of all types of cancer, while for non-Natives, the number was 194.6 per 100,000. According to the same study by the UND Center for Rural Health, diabetes disproportionately affects Native Americans when compared with all other populations and has been rising steadily for 16 years. In North Dakota, 10.9 percent of American Indian adults have diabetes, compared to 3.9 percent of white non-Hispanics and 3.8 percent of people of other races.

When it comes to suicide among American Indians younger than 19, the Aberdeen IHS Area has the second highest rate across IHS regions. This area, which includes North Dakota, reported 19.1 suicides per 100,000 people. This compares to the U.S. rate of 3 suicides per 100,000 people.

Beginning with the 2000 Census, the U.S. Department of Commerce has considered individuals with only Indian Health Service coverage as being essentially uninsured. Because of the chronic underfunding of Indian Health Service, these individuals have limited access to health services.

Barriers to health care

The Fort Berthold Reservation holds many barriers to health care. One of the most prominent involves a service area that is chopped literally in half by the massive reservoir created by the building of Garrison Dam in the 1950s. Although Lake Sakakawea is known as a great place to fish, it has created a physical barrier to health care for many. Because the Fort Berthold Reservation is sliced in half by the reservoir, some residents have great distances to travel for health care services. For example, those who live in and near Twin Buttes, face more than a 140-mile trip to emergency and hospital care at Minot's Trinity Health. And, from Twin Buttes to health clinics in New Town, it is more than a 100-mile trip. Although the Tribe operates a field clinic in Twin Buttes, it provides service on a limited number of days per week and health care providers are hard to find and keep.

The Wilson Cooperative's Mission

The Wilson Health Planning Cooperative's mission will result in a comprehensive and integrated health care plan for the region. The plan will be designed by the consumers and the providers of health care in the region. Common Enterprise Development Corporation—or CEDC—of Mandan provides technical assistance to the Wilson Health Planning Cooperative. CEDC staff members also assisted the Three Affiliated Tribes in writing and submitting the Community Health Center Planning Grant. Following the completion of the planning process, the cooperative intends to operate as a platform for implementing the plan. It is our belief that placing the Fort Berthold Reservation in a single public health unit will aid in the integration of the delivery of health care services and will contribute to a reduction in health disparities found on this reservation.

I would be happy to try to address any questions of the committee.

	Health Disparities							
	Age Adjusted Death Rates							
	Diseases of the Heart	Cancers	Diabetes	Suicide	Low Birthweight	Infant Death Ratio	Adult Asthma	Pediatric Asthma
Dunn	143.70	63.42	24.38	-	62.50	17.74	202	66
McKenzie	211.17	156.74	145.30	-	65.93	10.99	339	123
McLean	144.62	121.95	27.78	8.16	48.78	0.00	523	143
Mercer	188.18	107.00	17.24	-	93.46	0.00	481	146
Mountrail	134.67	105.10	40.65	16.83	88.50	8.85	376	161
State	167.46	157.86	27.74	13.84	63.63	6.13	39,395	13,467.0

Sources:

Diseases of the Heart

Cancer

Diabetes

Suicide

Low Birthweight Ratio

Infant Death Ratio

Adult Asthma

Pediatric Asthma

2009 ND Vital Statistics Age Adjusted Death Rate

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2009 ND Vital Statistics Age Adjusted Death Rate

2009 ND Vital Statistics

2009 ND Vital Statistics (Dunn Co. displays 10 year average)

American Lung Association Estimated Prevalence and Incidence of Lung Disease January 2010

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