

# [NCUIH Submits Comments to IHS on Health Information Technology Modernization](#)

Category: Policy Blog

written by Alexandra Payan | April 20, 2022

On April 8, 2022 the National Council of Urban Indian Health (NCUIH) submitted written comments to the Indian Health Service (IHS) on Health Information Technology (HIT) Modernization. The comments were submitted in response to the IHS's Dear Tribal Leader and Dear Urban Indian Organization [letter](#) dated February 22, 2022. In its comments, NCUIH thanked the IHS for its commitment to a collaborative HIT modernization process while urging the IHS to advance the HIT Modernization Project to select the best HIT solutions for the for the Indian Health Service/Tribal/Urban Indian Organization (I/T/U) system at the best possible speed. NCUIH also requested that IHS provide resources, both both human and financial, to continuously evaluate, support, and evolve I/T/U HIT systems as new technology and processes become available; ensure that the RPMS replacement system meets the technical needs of the whole I/T/U system, including UIOs; and requested that IHS continue to be transparent in this long-term, financially significant project, while also prov ensure consistent engagement with all I/T/U providers of all facility types to establish and maintain transparency with UIOs and responsiveness to concerns across the I/T/U system.

## **The Need for HIT Modernization**

[HIT](#) "is a broad concept that encompasses an array of technologies to store, share, and analyze health information." This includes, but is not limited to, "the use of computer hardware and software to privately and securely store, retrieve, and share patient health and medical information." HIT Modernization for the I/T/U system is long overdue. Although HIT is necessary to provided critical services and benefits to AI/AN patients, the IHS has historically faced challenges in managing clinical patient and administrative data through the Resource Management System (RPMS). Initially developed specifically for the IHS, years of underfunding and a resulting failure to keep pace with technological innovation have left the RPMS impractical by current HIT standards. RPMS has been in use for nearly 40 years and has developed significant issues and deficiencies during this time, especially in recent years as HIT systems have rapidly advanced in sophistication and usefulness. As the Department of Health and Human Services (HHS) Office of the Chief Technology Officer (OCTO) and IHS found in the [2019 Legacy Assessment](#), systemic challenges with RPMS "across all of the IHS ecosystem currently prevent providers, facilities and the organization from leveraging technology effectively."

In addition,

## **NCUIH's Requests to the IHS**

NCUIH made the following specific comments, requests, and recommendations in response to your February 22, 2022, correspondence and March 10, 2022, Tribal Consultation and Urban Confer:

- IHS must provide resources, both human and financial, to continuously evaluate, support, and evolve I/T/U HIT systems as new technology and processes become available
  - NCUIH requests that IHS provide sufficient funding for off-the-shelf costs of HIT modernization, including maintenance and IT support costs

- NCUIH advises IHS that it must account for additional delays and costs in its support for I/T/U HIT modernization
- NCUIH recommends that IHS dedicate a full-time staff person to support UIOs in the Office of IT (OIT) to improve training, support, and personnel in replacing the current RPMS, implementing new systems, and continuing support for UIOs utilizing any other commercial off-the-shelf (COTS) systems
- NCUIH urges IHS to work with Congress to address budgetary constraints and fiscal law restrictions blocking reimbursement of HIT modernization costs to Tribes and UIOs
- IHS must ensure that the RPMS replacement system meets the technical needs of the whole I/T/U system, including UIOs
  - NCUIH recommends that the RPMS replacement system provides full support for data exchange and interoperability both within and external to the I/T/U system
  - NCUIH advises IHS that the RPMS replacement system must support data reporting required for regulatory compliance
  - NCUIH requests that the RPMS replacement system provide a user-friendly experience that decreases the burden on I/T/U staff to access, make updates, and work in the new EHR system
- IHS must ensure consistent engagement with all I/T/U providers of all facility types to establish and maintain transparency with UIOs and responsiveness to concerns across the I/T/U system

NCUIH will continue to closely follow IHS's progress and policies with HIT Modernization and looks forward to participating in the additional Tribal Consultation and Urban Confer session later in the year.