

Data Modernization Tribal Implementation Center: Frequently Asked Questions

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Program Background and Overview

What is the Tribal Implementation Center?

- The Tribal Implementation Center (Tribal IC) is part of the Data Modernization Implementation Center program, which is supported by the US Centers for Disease Control and Prevention's (CDC) Public Health Infrastructure Grant (PHIG). The Tribal IC is intended to build Tribes' capacity to implement public health data modernization projects.
- The guiding approach is for Tribes and Tribal representatives to work in collaboration with the PHIG National Partners* to identify data opportunities and challenges, then work together on projects that advance data modernization by recruiting or training staff, creating and refining processes, and identifying and using best-fit technology.

*The three PHIG National Partners are the Association of State and Territorial Health Officials (<u>ASTHO</u>), the National Network of Public Health Institutes (<u>NNPHI</u>) and the Public Health Accreditation Board (<u>PHAB</u>).

What is the purpose of the Implementation Center Program?

- To advance data modernization efforts, CDC and the PHIG National Partners will provide direct technical implementation services to states, Tribes, localities, territories (STLTs), and freely associated states through Implementation Centers. These Implementation Centers will help STLTs and freely associated states improve data access and interoperability.
- In addition to direct project implementation support, the program will build the capacity of public health agencies and provide a network for resource sharing. The overarching goal of the program is to improve the timely prevention and detection of public health threats by reducing the burden of data exchange between public health agencies, healthcare systems, and the communities they serve.
- Three Implementation Centers provide support to state, local, territorial, and freely associated public health agencies, and one Implementation Center will support Tribes and Tribal-serving organizations.

What organization will operate the Tribal IC?

Chickasaw Health Consulting is serving as the Implementation Center supporting Tribes and Tribalserving organizations. As the Tribal IC, Chickasaw Health Consulting will:

- Support Tribal engagement.
- Facilitate a Tribal Expert Working Group.
- Provide technical support to participating Tribes for their data modernization projects, and general guidance to all Tribes interested in learning more about data modernization.
- Support project management and program communications.

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How do the Implementation Centers for states, localities, and territories differ from Tribal IC?

- Currently, state, local, territorial, and freely associated state health departments participating in the Implementation Center program are prioritizing electronic case reporting and connecting to health information exchange networks.
- The Tribal IC will be informed by Tribes' priorities. As a result, the Tribal IC could be supporting different types of data modernization projects. The Tribal IC will form a Tribal Expert Working Group (also referred to as a group of Tribal advisors) to support this.

How will the Tribal IC operate?

- The Tribal IC will be guided by an advisory body of Tribal representatives. This body will identify data challenges and opportunities for the Tribal IC.
- Tribes will have opportunities to apply for implementation project support and funding. Tribes will receive technical assistance from the Tribal IC and funding from the PHIG National Partners.

How to Get Involved

How can my Tribe get involved?

- Attend Tribal IC sessions at upcoming conferences.
- Email your ideas for potential Tribal data modernization projects and any additional thoughts, suggestions, and questions to tribalic@nnphi.org.
- Sign up for our <u>DMI Tribal IC Mailing List</u> to learn about opportunities to engage and receive program updates. Use the link above or scan the QR code at right to sign up.



- Apply for implementation project opportunities when available later in 2025.
- Watch for updates and announcements on the Public Health Infrastructure Grant website, <u>PHInfrastructure.org</u>.





Implementation Project Support and Timelines

What will the Tribal IC implement?

- The Tribal IC will support Tribes' efforts to improve public health data access and interoperability without infringing on Tribal sovereignty. Support may include training and technical assistance, technical consultation, funding for local implementation, and development of data platforms and systems.
- Specific implementation projects will be identified in collaboration with Tribes.

What kind of projects can Tribes expect to receive support for?

- Current projects of interest include (1) electronic case reporting to automate communication of infectious disease data and (2) enabling Tribes' connections to health information exchange networks.
- Additional project types will be identified in collaboration with Tribal advisors, partners, and CDC.
 We recognize that Tribes have specific priorities and look forward to hearing suggestions for other data modernization projects email us at tribalic@nnphi.org!
- Participating Tribes will receive direct technical support from health IT experts through the Implementation Center and funding from the PHIG National Partners.

Will participating Tribes be required to implement the Trusted Exchange Framework and Common Agreement (TEFCA)?

- While TEFCA represents an objective for the broader Implementation Center Program, it is not the sole focus. The Tribal IC will support Tribes in building modern data infrastructure, using the latest health IT standards to improve data access and health outcomes for Tribes.
- The Tribal IC will provide technical assistance to Tribes that are interested in joining TEFCA or learning more about it. What that assistance specifically includes will depend on the Tribe's goals and technical readiness.





What is the timeline for the Tribal IC and what is the timeline for Tribes to receive assistance?

- The PHIG National Partners are balancing the time needed to gather input from Tribes with a desire to begin supporting Tribal public health data modernization projects as soon as possible. In early 2025, the PHIG National Partners began engaging with Tribes at Tribal public health conferences and venues, and they will continue doing so on an ongoing basis. These engagements empower Tribal representatives to identify data challenges and opportunities for the Tribal IC to address.
- PHIG National Partners plan to begin working on initial implementation projects with Tribes or Tribal Epidemiology Center (TECs) in summer 2025, with opportunities for additional Tribes and TECs to participate from fall 2025 through fall 2027.
- The Implementation Center Program is currently planned to operate through fall 2027, in alignment with the Public Health Infrastructure Grant.

How will the PHIG National Partners ensure participation requirements are not burdensome for Tribes?

The PHIG National Partners will strive to minimize administrative barriers to Tribes' participation.
 We encourage interested Tribes and TECs to send us their related concerns and suggestions – email us at tribalic@nnphi.org.

Funding

How much funding is going to Tribes?

• Specific awards for each implementation project will be determined as implementation partners scope their projects in collaboration with the Tribal IC.

What can funds be used for?

• Funding can be used to improve data systems, including adopting modern health IT tools and connecting to health information exchanges. We welcome your suggestions on other needs for funding support.

Why didn't CDC provide data modernization funding directly to Tribes?

• The Tribal IC and its overarching Implementation Center program are part of the Public Health Infrastructure Grant. CDC selected ASTHO, PHAB, and NNPHI as the national partners for this





program. The PHIG National Partners look forward to supporting Tribal public health data modernization.

• Tribes can send CDC questions or comments on federal funding for Tribal data modernization via their Tribal leadership.

Are Tribal public health agencies going to get less money than state, territorial & local public health agencies?

 No. All four Implementation Centers are comparably funded. The PHIG National Partners also anticipate being able to provide comparable funding to all public health agencies that choose to participate.

Tribal Sovereignty

How will the Tribal Implementation Center support and protect Tribal sovereignty?

- The Tribal IC will ensure Tribes and delegated representatives are included when designing solutions for Tribal data challenges. This will entail partnership approaches that identify specific policy challenges unique to Tribal communities and technical solutions that maintain respect Tribes' right to govern their own data.
- We welcome your thoughts on Tribal sovereignty issues and how the Tribal IC might address them.

Sustainability

How will the program address sustainability for the projects that Tribes and TECs implement?

• Sustainability planning will be part of the support offered by the Implementation Center to participating Tribes. Specifics will depend on the implementation project, including its technical infrastructure.





Program Structure & Partners

Can you explain the partnerships surrounding the Tribal IC?

- ASTHO, NNPHI, and PHAB are CDC's National Partners for the Public Health Infrastructure Grant (PHIG). The PHIG National Partners have contracted Chickasaw Health Consulting to operate the Tribal IC and provide support to Tribes that volunteer to participate in the program. These Tribes will receive support to implement data modernization projects that address their priorities.
- PHIG National Partners are working with the National Indian Health Board (NIHB) to engage effectively and respectfully with the Tribal public health community.
- PHIG National Partners are working with the Counsel of State and Territorial Epidemiologists and their Tribal Epidemiology group to build capacity for data access and analysis.
- PHIG National Partners plan to work with a group of Tribal advisors to ensure the Tribal IC is aligned with Tribal needs, values, and priorities.
- The PHIG National Partners selected CRISP Shared Services, Mathematica, and Guidehouse to serve as the other three Implementation Centers. These centers provide direct technical implementation services to state, local, territorial, and freely associated state public health agencies.

How does the role of PHIG National Partners differ from that of the Tribal IC contractor?

- The PHIG National Partners oversee governance, provide strategic direction for the Implementation Center program, and lead coordination across the Implementation Centers. National Partners will also distribute funding to participating public health agencies to support their data modernization projects.
- The Tribal IC contractor Chickasaw Health Consulting will support day-to-day execution of Implementation Center program activities: they will engage with public health agencies, facilitate convenings of a Tribal advisory body, and provide technical assistance. Technical assistance will include hands-on support to Tribes that choose to implement data modernization projects. Chickasaw Health Consulting will also provide guidance and capacity-building resources that will be available to all Tribes.

What is the relationship between the Tribal IC and the Indian Health Service (IHS) Health IT Modernization program?

• In general, the Tribal IC focuses on improving data systems used by Tribal public health agencies, while the IHS Health IT Modernization program is focusing on improving electronic health record (EHR) systems used by healthcare providers treating American Indian/Alaska Native patients.





In other words, the Tribal IC is designed to improve data systems that monitor and track the health of entire Tribal communities. EHRs help healthcare providers manage and track care for individual patients, as EHRs store patient medical histories, lab results, medications, and treatment plans. Both systems are necessary and can intersect. For example, public health data systems can use EHR data to track the rates of disease in a community, identify groups of people who are most at risk, and use that data to determine how to best prevent or reduce diseases within that community.

• Coordination between these two programs (the Tribal IC and IHS's Health IT Modernization program) can be mediated by the Department of Health and Human Services and informed by the public health data priorities described by Tribes participating in the Tribal Implementation Center program.

Comparisons to State, Local, Territorial and Freely Associated State Agency Implementation Centers

Why is the Tribal IC launching after the Implementation Centers supporting state, local, territorial and freely associated state public health agencies?

- The PHIG National Partners recognize the sovereignty of Tribal nations and recognize that their public health data modernization needs and priorities may be very different from state, local, and territorial, and freely associated state public health agencies (PHA).
- In early 2025, Implementation Centers serving state, local, territorial and freely associated state public health agencies selected their first group of agencies to receive tailored support in modernizing their data systems. We anticipate the Tribal IC will begin supporting Tribes in mid 2025 as Tribes volunteer to participate.

What are participating state/local/territorial agencies doing?

- State, local, and territorial public health agencies participating in projects focused on electronic case reporting and connecting to a new nationwide health information network called TEFCA (Trusted Exchange Framework and Common Agreement).
- The PHIG National Partners understand some Tribes are interested in these projects. We are seeking guidance and suggestions from Tribes on other types of data projects we should consider supporting.





Does Tribal IC have less time to complete the work?

• We anticipate implementation project opportunities will start in 2025 for all initial public health agencies joining the program. This includes states, tribes, localities, territories, and freely associated states.

