



**DENALI COMMISSION**  
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Anchorage, Alaska 99501

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**RESOLUTION NO. 00 - 17**  
**A RESOLUTION ON INFRASTRUCTURE FUNDING FOR**  
**FEDERAL FY2001 HEALTH CARE FACILITIES**

WHEREAS, Federal Fiscal Year 2000 legislative language authorized the Denali Commission to fund and support rural health care facilities with a requirement of project cost share of either 50% or 20% depending upon local community economic conditions, and

WHEREAS, Federal Fiscal Year 2001 appropriation language (Departments of Labor, Health and Human Services, and Education and related agencies appropriation bill) calls for funding of \$10,000,000, and which authorizes the provision of health care services, including healthcare facilities, for Native and rural Alaskans through the Denali Commission, and

WHEREAS, the Denali Commission, the Indian Health Service, the State Department of Health and Social Services, and the Alaska Native Tribal Health Consortium entered into a joint project agreement to complete a needs assessment for rural primary care facilities (final report scheduled for completion by October 20, 2000), and

WHEREAS, recognizing that health care is both facility and operations driven, the parties to the needs assessment desire to undertake a Phase 2 needs assessment that will assess program/operational improvements for improved rural health services, and

WHEREAS, the parties to the needs assessment also recognize the value of standardized preliminary clinic designs and other planning tools that would enable and guide a community to identify the levels of programmatic primary care that can be reasonably provided and consequently lead to appropriate clinic layout and design, and

WHEREAS, the parties to the joint project agreement have prepared a project prioritization methodology (one of several tasks of the needs assessment) for allocating funding for rural primary care facilities for the specific use of the Denali Commission to identify projects for Commission funding, and

WHEREAS, the methodology includes three separate funding lists: a) an existing Indian Health Service priority list, b) a prioritized list of 286 individual communities based upon need, and c) a proposed list for "multi-community" clinics and/or clinics that serve communities with an excess of 800-year round residents, and

WHEREAS, The Indian Health Service priority list includes proposed clinics at St. Paul and Metlakatla (planning funds for soils investigations, surveying, environmental review, project scoping, etc. have been allocated by the Indian Health Service), and

WHEREAS, it has been reported by the Indian Health Service that by December 2000 the project scoping should be completed and estimated costs for design of the Metlakatla and St. Paul clinics and supporting facilities should also be known, and

WHEREAS, projections from the Indian Health Service is that construction funding for the Metlakatla and the St. Paul clinics should be provided over the course of Federal FYs 2002 and 2003, and

WHEREAS, timely design funding for the St. Paul and Metlakatla clinics is expected to accelerate the development of these projects, and

NOW THEREFORE BE IT RESOLVED, that the Commission identifies the following projects and/or programs for FY2001 funding:

1. Two and a half million dollars will be reserved for design services only (no construction funding) for the Metlakatla and St. Paul clinics. Once design of the facilities has been completed any balance of funds will be used for other health care services and facilities needs, as identified by the Denali Commission individual community or multi-community clinic prioritization lists.
2. A total of \$300,000 is reserved for addressing programmatic needs. No expenditure of these funds will occur until there is unanimous agreement within the steering group on how the funds will be used and written approval is provided by the State and Federal Co-chairs.
3. A total of up to \$200,000 is reserved for development of standardized rural clinic designs.
4. A total of \$7,000,000 (and any residual funding remaining from allocations in Paragraph Nos. 1, 2 or 3 above) will be set aside to fund the community specific or multi-community projects identified using the prioritization methodology which may include emergency medical services equipment or related facilities adjunct to the clinic.

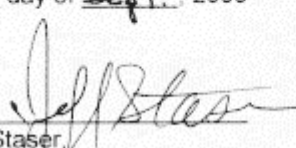
BE IT FURTHER RESOLVED, that the Commission directs Commission staff to explore and develop relationships with other state and federal agencies to support, enhance, and coordinate funding for the clinic project lists.

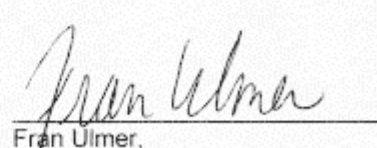
#### CERTIFICATION

We, the undersigned, hereby certify that the Denali Commission is comprised of seven members (or their duly appointed alternate), of whom 7, constituting a quorum, were present at a meeting duly and regularly called, noticed, convened and held this 14 day of September, 2000, and that the foregoing Resolution was duly adopted at said meeting by the affirmative vote of 7 members, and opposed by 0 members, and that said Resolution has not been rescinded or amended in any way.

DATED this 14<sup>th</sup> day of Sept., 2000

SIGNED:

  
Jeff Staser,  
Federal Co-Chair

  
Fran Ulmer,  
State Co-Chair