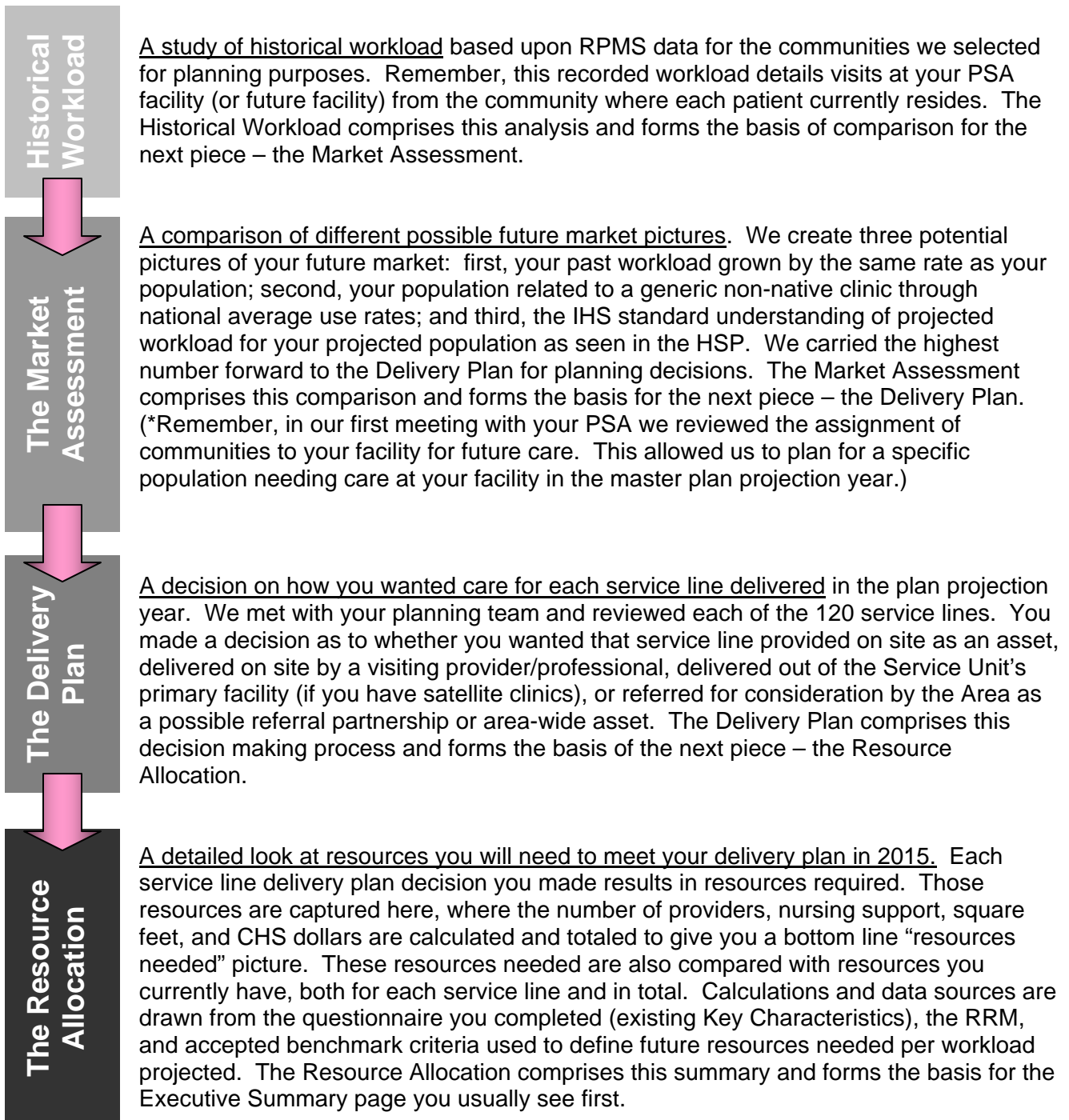




## How to Read Your Primary Service Area Document

While supporting explanation of your PSA document is found throughout the master plan document, you may find this condensed, pictorial guide helpful as you thoughtfully study your own PSA's plan. Remember, it is your plan. You worked with an Innova Group consultant through an ordered path to arrive where you are. These steps included:





Guide to the Historical Workloads Page

Sample Portion of a  
Typical Historical  
Workload Page

**Historical Workloads by Community of Residence - Native American**

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

Discipline	Direct or Tribal Health Care				Contract Health Care				
	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
	Provider Visits Only				Provider Visits Only				
<b>Primary Care</b>									
Family Practice	357	1,347	2,451	1,385	0	0	0	0	0.0%
Internal Medicine	185	134	125	148				0	0.0%
Pediatric	56	75	65	65	0	0	0	0	0.0%
Ob/Gyn	39	60	50	50	0	0	0	0	0.0%
<b>Emergency Care</b>									
Emergency/Urgent	235	245	251	244				0	0.0%
ER/Non-urgent	0	0	0	0				0	0%
<b>Specialty Care</b>									
Orthopedics	23	10	25	19	0	0	0	0	0.0%
Ophthalmology	67	62	53	61	1	0	0	0	0.5%
Dermatology	7	3	6	5	1	0	0	0	6.1%
General Surgery	15	14	10	13	2	0	0	1	4.8%
Otolaryngology	56	23	33	37	2	0	0	1	1.8%
Cardiology	9	7	2	6	4	0	0	1	18.5%
Urology	0	0	0	0				0	0%
Neurology	8	2	6	5	0	0	0	0	0.0%
Nephrology	0	0	0	0	2	0	0	1	100.0%

These 3 blue columns detail your Historical Workload for the years shown at the top of the page. These numbers are from the RPMS data set and represent visits by community of residence for communities assigned to your facility for future planning purposes. That list of communities can be found in the Service Area Community Assumptions pages of the Area analysis.

These yellow columns average the 3 year workloads for Direct and Contract Care.

These 3 blue columns detail your Historical Workload for the years shown referred for Contracted Care. If that care was paid for by a third party instead of IHS, then that visit will not be reflected here. You should not be overly concerned since the Market Assessment provides an alternative and generous method of projecting what is missed here.

This yellow column shows the % of Workload historically referred to Contract Care for the past three years.



**A Guide to the Market Assessment Page**

**Sample Portion of a Typical Market Assessment Page**

**Market Assessment - *Native American***

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year	2003			2015			2015 Planning Assumption		
HSP User Pop. - PSA	1,385			2,146					
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
	Provider Visits Only			Provider Visits Only			Provider Visits Only		
<b>Primary care</b>									
Family Practice	1,385	1,392		2,147	2,322		2,660	2,660	0
Internal Medicine	148	470		229	779		779	779	0
Pediatric	65	794		101	1,327		1,327	1,327	0
Ob/Gyn	50	540		77	907		907	907	0
Urgent Care Clinic	0			0			0	0	0
Primary Care Sub-Tot.	1,648	3,195	3,783	2,554	5,334	5,672	5,672	5,672	0
<b>Emergency Care</b>									
Emergency/Urgent	244	291		378	486		486	486	0
ER/Non-urgent		194			324		324	324	0
Emerg. Care Sub-Tot.	244	486	424	378	810	636	810	810	0
<b>Specialty Care</b>									
Orthopedics	19	231		30	386		386	386	0
Ophthalmology	61	139		94	229		229	229	0
Dematology	5	180		8	300		300	300	0
General Surgery	14	175		21	291		291	291	0
Otolaryngology	38	111		59	184		184	184	0
Cardiology	7	38		11	62		62	62	0
Urology	0	52		0	86		86	86	0
Neurology	5	48		8	81		81	81	0
Other Specialties		369		0	613		421	421	0

These two population numbers form the reference point for the columns underneath. Remember, the user pop here may or may not be the same as your service unit pop. It depends on how many points of care have been established and are being planned for. These numbers are for your specific PSA.

These yellow columns represent the Historical Workload average from the previous page carried forward and grown to the projection year by the same rate as your user pop is expected to grow.

These yellow columns represent your user population related to National Utilization rates by service line to create a US National Average hypothetical workload for comparing to your historical workload. Often these numbers are higher than yours, particularly in Specialty Care lines.

These pink cells represent a third way of assessing your future market – what the HSP would expect to see in terms of workload for the population under consideration, both in 2001 and the projection year targeted. The HSP represents the IHS understanding of native health care use rates.

This yellow column is typically the largest of the three projection numbers considered under the projection year. This becomes your planning assumption. The green columns split that planning assumption into direct care you will choose a delivery plan for, and contracted care that is not considered due to acuity/threshold issues.



## A Guide to the Delivery Plan Page

## Sample Portion of a Typical Delivery Plan Page

### Delivery Plan - *Native American (IHS)*

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Discipline	Projected Need				Delivery Options						
	PSA Direct	+ E SA Direct	Key Characteristics	# Req'd	PSA			Referrals due to Threshold			
	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Area	Remarks
<b>Primary Care (Provider Visits)</b>											
Crossover %	0.0%										
<i>Primary Care Clinic examines, diagnoses, and treats professionals and admissions to inpatient services w provides, and evaluates the care of patients with he care of patients with chronic diseases, and health</i>											
Family Practice	2,660	2,660	Providers	0.6	2,660						
Internal Medicine	779	779	Providers	0.2		779					
Pediatric	1,327	1,327	Providers	0.3		1,327					
Ob/Gyn	907	907	Providers	0.3		907					
Urgent Care Clinic	0	0	Providers	0.0	0						
Primary Care Total	5,672	5,672	Providers	1.4	2,660	3,012	0	0	0		

Sometimes the workload numbers do not match the Market Assessment line because the HSP Sub-total on the Market Assessment has been carried forward and the service lines subtracted out to provide maximum benefit. Call your Innova Group planner if you have a question on this.

<b>Emergency Care</b>											
Crossover %	0.0%										
<i>The Emergency Medical Clinic provides emergency care, diagnostic services, treatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.</i>											
Emergency/Urgent	486	486	Patient Spaces	0.1		486					
ER/Non-urgent	324	324	Providers	0.1		324					
Emergency Care Total	810	810	Patient Spaces	0.4	0	0	810	0	0		

<b>Specialty Care</b>											
Crossover %	0.0%										
<i>Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.</i>											
Orthopedics	386	386	Providers	0.1		386					
Ophthalmology	229	229	Providers	0.1		229					
Dermatology	300	300	Providers	0.1		300					Telemedicine
General Surgery	291	291	Providers	0.1		291					
		184	Providers	0.1		184					
		62	Providers	0.0		62					
		86	Providers	0.0							
		81	Providers	0.0							
		421	Providers	0.2							

These green cells are the direct care planning assumption number carried forward from the market assessment page. For certain service lines an appropriate crossover / migration rate is applied (the pink box) that will inflate the workload number.

These columns identify the number of that specific Key Characteristic needed to service the green cell workload number to the left.

These columns identify your delivery planning decision – that is, where you desire the care to be delivered in your projection year: on-site (as an asset or by visiting provider), purchased through CHS funds, handled at the Service Unit (if you have satellite clinics) or referred to the area/referral area for consideration there.

This column notes remarks that often provide clarification on the planning decision made.

