



May 12, 2011

**TO:** Yvette Roubideaux, M.D., M.P.H.  
Director  
Indian Health Service

**FROM:** /Daniel R. Levinson/  
Inspector General

**SUBJECT:** Audit of the Indian Health Service's Internal Controls Over Monitoring of Recipients' Compliance With Requirements of the Indian Health Professions Scholarship Program (A-09-09-00044)

The attached final report provides the results of our review of the Indian Health Service's internal controls over monitoring of recipients' compliance with certain requirements of the Indian Health Professions Scholarship program.

Section 8L of the Inspector General Act, 5 U.S.C. App., requires that the Office of Inspector General (OIG) post its publicly available reports on the OIG Web site. Accordingly, this report will be posted at <http://oig.hhs.gov>.

If you have any questions or comments about this report, please do not hesitate to call me, or your staff may contact Lori S. Pilcher, Assistant Inspector General for Grants, Internal Activities, and Information Technology Audits, at (202) 619-1175 or through email at [Lori.Pilcher@oig.hhs.gov](mailto:Lori.Pilcher@oig.hhs.gov). We look forward to receiving your final management decision within 6 months. Please refer to report number A-09-09-00044 in all correspondence.

Attachment

Department of Health & Human Services

**OFFICE OF  
INSPECTOR GENERAL**

**AUDIT OF THE INDIAN HEALTH  
SERVICE'S INTERNAL CONTROLS OVER  
MONITORING OF RECIPIENTS'  
COMPLIANCE WITH REQUIREMENTS OF  
THE INDIAN HEALTH PROFESSIONS  
SCHOLARSHIP PROGRAM**



Daniel R. Levinson  
Inspector General

May 2011  
A-09-09-00044

# *Office of Inspector General*

<http://oig.hhs.gov>

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The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health & Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

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Section 8L of the Inspector General Act, 5 U.S.C. App., requires that OIG post its publicly available reports on the OIG Web site.

## **OFFICE OF AUDIT SERVICES FINDINGS AND OPINIONS**

The designation of financial or management practices as questionable, a recommendation for the disallowance of costs incurred or claimed, and any other conclusions and recommendations in this report represent the findings and opinions of OAS. Authorized officials of the HHS operating divisions will make final determination on these matters.

## EXECUTIVE SUMMARY

### BACKGROUND

The Indian Health Service (IHS), an agency in the U.S. Department of Health & Human Services, delivers clinical and preventive health services to American Indians and Alaska Natives. IHS provides care in more than 700 health care facilities, including hospitals and outpatient clinics. An IHS facility can be operated by IHS, an Indian tribe, or a tribal organization.

Section 104 of the Indian Health Care Improvement Act (IHCIA) of 1976 (P.L. No. 94-437), as amended, requires IHS to administer the Indian Health Professions Scholarship program. The purpose of this program is to increase the number of American Indians and Alaska Natives entering health professions and to ensure the availability of Indian health professionals to serve Indians. Under the program, IHS provides scholarship grants (scholarships) to Indians who are enrolled full or part time in appropriately accredited schools and pursuing courses of study in the health professions. IHS awarded approximately \$24.7 million in health professions scholarships for the 2-year period ended August 31, 2008.

Pursuant to section 104(a) of the IHCIA, each recipient of health professions scholarship funds must sign an Indian Health Scholarship Program Contract with IHS in which he or she agrees to complete an approved education program and fulfill a minimum active duty service obligation of 2 years. According to the *Indian Health Manual*, IHS is responsible for monitoring recipients to ensure that they are in compliance with section 104 of the IHCIA and the contract with IHS. A recipient who fails to complete the approved education program must repay the Federal Government all funds paid under the contract. A recipient who fails to begin or complete the required service obligation must repay an amount calculated according to a formula described in section 108(l) of the IHCIA.

The Federal Managers' Financial Integrity Act of 1982 (P.L. No. 97-255) requires each executive agency to develop internal controls in accordance with standards prescribed by the Comptroller General and to provide reasonable assurance that funds are safeguarded against waste, unauthorized use, or misappropriation. The Office of Management and Budget Circular A-123 states that Federal agency management is responsible for establishing and maintaining internal control activities to meet the objectives of effective and efficient operations and compliance with applicable laws and regulations.

### OBJECTIVE

Our objective was to determine whether IHS had adequate internal controls to monitor recipients' compliance with certain requirements of the Indian Health Professions Scholarship program.

## **SUMMARY OF FINDINGS**

IHS did not have adequate internal controls to monitor recipients' compliance with certain requirements of the Indian Health Professions Scholarship program. Specifically, IHS did not always follow its policies and procedures to verify that recipients completed approved education programs and that recipients were fulfilling their required service obligations. As a result, IHS could not ensure that all recipients were in compliance with Indian Health Professions Scholarship program requirements.

## **RECOMMENDATION**

We recommend that IHS follow its policies and procedures to verify that recipients of Indian health professions scholarships complete approved education programs and fulfill required service obligations.

## **INDIAN HEALTH SERVICE COMMENTS**

IHS concurred with our recommendation and described actions that it had taken or planned to take to address the recommendation. IHS's comments are included in their entirety as the Appendix.

## TABLE OF CONTENTS

	<u>Page</u>
<b>INTRODUCTION</b> .....	1
<b>BACKGROUND</b> .....	1
Indian Health Service.....	1
Indian Health Professions Scholarship Program.....	1
Indian Health Professions Scholarship Program Requirements for Recipients.....	1
Federal Requirements for Internal Controls .....	2
Office of Inspector General Reviews .....	2
<b>OBJECTIVE, SCOPE, AND METHODOLOGY</b> .....	3
Objective.....	3
Scope.....	3
Methodology.....	3
<b>FINDINGS AND RECOMMENDATION</b> .....	4
<b>FEDERAL REQUIREMENTS</b> .....	4
<b>VERIFICATION OF COMPLETION OF EDUCATION PROGRAMS</b> .....	4
<b>VERIFICATION OF FULFILLMENT OF SERVICE OBLIGATIONS</b> .....	5
<b>RECOMMENDATION</b> .....	6
<b>INDIAN HEALTH SERVICE COMMENTS</b> .....	6
<b>APPENDIX</b>	
<b>INDIAN HEALTH SERVICE COMMENTS</b>	

## INTRODUCTION

### BACKGROUND

#### Indian Health Service

The Indian Health Service (IHS), an agency in the U.S. Department of Health & Human Services, delivers clinical and preventive health services to American Indians and Alaska Natives. IHS provides care in more than 700 health care facilities, including hospitals and outpatient clinics. An IHS facility can be operated by IHS, an Indian tribe, or a tribal organization.

The Indian Health Care Improvement Act (IHCIA) of 1976 (P.L. No. 94-437), as amended, authorizes IHS funding to administer programs to attract and recruit qualified individuals into health professions needed at IHS facilities. These programs are intended to encourage American Indians and Alaska Natives to enter health professions and to ensure the availability of Indian health professionals to serve Indians.

#### Indian Health Professions Scholarship Program

Section 104 of the IHCIA, as amended, requires IHS to administer the Indian Health Professions Scholarship program. The purpose of this program is to increase the number of American Indians and Alaska Natives entering health professions and to ensure the availability of Indian health professionals to serve Indians.

Under the Indian Health Professions Scholarship program, IHS provides scholarship grants (scholarships) to Indians who are enrolled full or part time in appropriately accredited schools and pursuing courses of study in the health professions. According to the *IHS Scholarship Program Application Handbook*, scholarships are for a 1-year period. Additional scholarship support may be awarded to each eligible student for up to a maximum of 4 years. IHS awarded approximately \$24.7 million in health professions scholarships for the 2-year period ended August 31, 2008.

#### Indian Health Professions Scholarship Program Requirements for Recipients

Pursuant to section 104(a) of the IHCIA, each recipient of health professions scholarship funds must sign an Indian Health Scholarship Program Contract with IHS in which he or she agrees to, among other things, complete an approved education program and fulfill an active duty service obligation.<sup>1</sup> Section 104(a) of the IHCIA and section B of the contract require the recipient to maintain enrollment in the approved course of study until completion, maintain an acceptable level of academic standing while enrolled in the approved education program, and fulfill a minimum service obligation of 2 years.

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<sup>1</sup> Section 104(a), as amended by P.L. No. 100-713, incorporates the requirements contained in section 338A of the Public Health Service Act (42 U.S.C. § 2541).

Pursuant to section 104(b)(3)(A) of the IHCIA, the service obligation may be fulfilled in IHS, in a program conducted under a contract entered into under the Indian Self-Determination Act, in a program assisted under Title V of this Act, or in the private practice of the applicable profession if such practice is situated in a physician or other health professional shortage area and addresses the health care needs of a substantial number of Indians. Pursuant to section 104(b)(3)(B) of the IHCIA, the service obligation may be deferred for the recipient to complete any internship, residency, or other advanced clinical training that is required for the practice of the applicable health profession, subject to certain conditions.

Pursuant to section 104(b)(5) of the IHCIA, as amended by P.L. No. 102-573, a recipient who has entered into a contract with IHS is liable to the Federal Government for all funds paid under the contract if the recipient fails to maintain an acceptable level of academic standing in the educational institution in which he or she is enrolled; is dismissed from the institution for disciplinary reasons; voluntarily terminates training in the institution before completion; or fails to accept payment or instructs the educational institution not to accept payment of a scholarship under the contract in lieu of any service obligation. A recipient who fails to begin or complete the required service obligation must repay an amount calculated according to a formula described in section 108(l) of the IHCIA. Section 108(l) requires that a recipient repay the Federal Government an amount equal to three times the funds received, plus interest, reduced by the percentage of the service obligation that was fulfilled.

However, pursuant to section 104(b)(5)(C) of the IHCIA, any service or payment obligation is canceled upon the recipient's death. In addition, section 104(b)(5)(D) authorizes IHS to waive or suspend any service or payment obligation when (1) it is not possible for the recipient to meet the obligation or make the payment, (2) requiring the recipient to meet the obligation or make the payment results in extreme hardship, or (3) enforcement of the requirement would be unconscionable.

### **Federal Requirements for Internal Controls**

The Federal Managers' Financial Integrity Act (FMFIA) of 1982 (P.L. No. 97-255) requires each executive agency to develop internal controls in accordance with standards prescribed by the Comptroller General and to provide reasonable assurance that funds are safeguarded against waste, unauthorized use, or misappropriation. The Office of Management and Budget (OMB) Circular A-123 provides guidance on implementation of the FMFIA and further defines management's responsibility for internal controls in Federal agencies.

### **Office of Inspector General Reviews**

We reviewed IHS's internal controls for monitoring recipients' compliance with the education and service obligation requirements of the Indian Health Professions Scholarship program. Separate reports address IHS's internal controls for monitoring recipients' compliance with certain requirements of IHS's Loan Repayment Program (A-09-10-01005), Nursing Program (A-09-10-01006), and American Indians Into Psychology Program (A-09-10-01007).

## **OBJECTIVE, SCOPE, AND METHODOLOGY**

### **Objective**

Our objective was to determine whether IHS had adequate internal controls to monitor recipients' compliance with certain requirements of the Indian Health Professions Scholarship program.

### **Scope**

We reviewed IHS's internal controls over its monitoring of recipients' compliance with certain requirements for health professions scholarships. We limited our review of internal controls to those controls for monitoring recipients' completion of education programs and fulfillment of service obligations.

We limited our review to the documentation that IHS maintained for each recipient. We did not determine whether recipients were eligible to receive health professions scholarships.

We performed our fieldwork at IHS Headquarters in Rockville, Maryland.

### **Methodology**

To accomplish our objective, we:

- reviewed applicable Federal laws, regulations, and guidance;
- interviewed IHS officials to obtain an understanding of the recipient requirements of the Indian Health Professions Scholarship program;
- reviewed IHS's policies and procedures for monitoring recipients' compliance with Indian Health Professions Scholarship program requirements;
- obtained an understanding of the IHS data systems used to monitor recipients' completion of education programs and fulfillment of service obligations;
- selected a judgmental sample of 44 recipients of Indian health professions scholarship funds in Federal fiscal year 2007; and
- reviewed IHS's paper and electronic documentation and interviewed IHS officials to verify whether IHS monitored the sampled recipients' completion of education programs and fulfillment of service obligations.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions

based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

## **FINDINGS AND RECOMMENDATION**

IHS did not have adequate internal controls to monitor recipients' compliance with certain requirements of the Indian Health Professions Scholarship program. Specifically, IHS did not always follow its policies and procedures to verify that recipients completed approved education programs and that recipients were fulfilling their required service obligations. As a result, IHS could not ensure that all recipients were in compliance with Indian Health Professions Scholarship program requirements.

### **FEDERAL REQUIREMENTS**

The FMFIA, section 2(d)(1)(A), states: "... [I]nternal accounting and administrative controls of each executive agency shall be established in accordance with standards prescribed by the Comptroller General, and shall provide reasonable assurances that ... (ii) funds, property, and other assets are safeguarded against waste, loss, unauthorized use, or misappropriation ...."

OMB Circular A-123, section II, states: "Internal control is an integral component of an organization's management that provides reasonable assurance that the following objectives are being achieved: effectiveness and efficiency of operations ... and compliance with applicable laws and regulations." Section II also states: "Management is responsible for developing and maintaining internal control activities ... to meet the above objectives." Section III.A. states: "... [Management] should design management structures that help ensure accountability for results. As part of this process, agencies and individual Federal managers must take systematic and proactive measures to develop and implement appropriate, cost-effective internal control."

### **VERIFICATION OF COMPLETION OF EDUCATION PROGRAMS**

IHS is responsible for ensuring that recipients are in compliance with section 104 of the IHCIA and the contract with IHS, both of which require recipients to complete approved education programs. This responsibility is reflected in part 5 of the *Indian Health Manual* (the Manual), which contains IHS policies and procedures, including policies for IHS's scholarship programs.

Sections 20.7A. and 20.6I. of the Manual, respectively, assign within IHS the responsibility to "ensure that the statutory requirements of [IHCIA] are met" and that the terms of IHS scholarship contracts are met. Section 20.7B. of the Manual requires IHS personnel to "... monitor academic performance in order to assure success in the scholarship recipient's health education." In addition, sections 20.2E. and 20.8E. of the Manual assign responsibility within IHS to monitor the recipient's academic performance. Finally, section 20.10E. states that the recipient must provide IHS with acceptable verification that all requirements of a health profession degree have been completed to be eligible to begin the required service obligation.

IHS's *Scholarship Program Procedures*, procedures 1.03 and 1.04, introduced in October 2008, instruct IHS to monitor the recipient's academic status on an ongoing basis. Both procedures

require IHS personnel to review the recipient's transcript to determine whether the recipient is struggling, failing, or no longer in an approved program and whether course changes have been made. In addition, procedure 1.08, also introduced in October 2008, instructs IHS personnel to obtain from the recipient proof of education program completion before the recipient is accepted for placement in a position that satisfies the service obligation. Examples of acceptable proof include a diploma or a copy of a medical license or certificate if applicable to the recipient's health profession.

Of the 44 recipients we selected for review, we identified 38 recipients who should have completed their education programs.<sup>2</sup> This determination was based on reviewing IHS's documentation for the recipients. IHS did not verify that 29 of those recipients had completed their education programs. IHS's documentation related to the 29 recipients did not contain any evidence demonstrating that the recipients had completed their education programs, indicating that IHS staff had not monitored recipients' compliance with this requirement. We interviewed the IHS program analysts responsible for maintaining and reviewing the files of the 29 recipients and confirmed that IHS did not verify that the recipients had completed their education programs. For the remaining nine recipients, IHS's documentation contained evidence demonstrating that the recipients had completed their education programs.

Before our review, IHS had made only limited attempts to contact recipients who had not submitted evidence of completion of education programs. IHS had requested from only 4 of the 29 recipients evidence of education program completion and did not follow up with the recipients who had not provided the requested documentation. In addition, during our fieldwork, IHS requested from 6 of the 29 recipients evidence of education completion but received it from only 3 recipients.

## **VERIFICATION OF FULFILLMENT OF SERVICE OBLIGATIONS**

IHS is responsible for monitoring recipients to ensure that they are in compliance with section 104 of the IHCA and the contract with IHS, both of which require recipients to fulfill service obligations. This responsibility is reflected in part 5, sections 20.6 and 20.7, of the Manual. Part 5, section 20.10I., of the Manual requires IHS personnel to notify a recipient of the requirement to fulfill a service obligation. Specifically, IHS personnel must document and notify recipients of an anticipated service obligation completion date. Once employed, the recipient is required to provide IHS with evidence of employment (e.g., civil service personnel action form and current job description).

IHS's *Scholarship Program Procedures*, procedure 1.08, states that IHS program analysts facilitate and monitor placement of graduating recipients and are expected to ensure placement of most recipients within 90 days of graduation. Procedure 1.08 instructs IHS personnel to (1) remind the recipient of the requirement to provide IHS with annual status reports and (2) maintain those reports to verify the status of the service obligation. Annual status reports, accompanied by personnel orders or a civil service personnel action form and a current job description, provide IHS with evidence that the recipient is fulfilling his or her service obligation. These reports are due to IHS annually from the service obligation start date until the

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<sup>2</sup> The remaining six recipients were in the process of completing their education programs.

service obligation is completed. Further, procedure 1.11, also introduced in October 2008, instructs IHS personnel to monitor all recipient files at least twice per year to determine when recipients are scheduled to begin their service obligations or have not found employment and are recommended for default.

Of the 44 recipients we selected for review, we identified 34 recipients who were in their service obligation period.<sup>3</sup> This determination was based on reviewing IHS's documentation for the recipients. IHS did not verify that 32 of those recipients had begun their service obligations.<sup>4</sup> IHS's documentation related to the 32 recipients did not contain any evidence demonstrating that the recipients had begun their service obligations, indicating that IHS staff had not monitored recipients' compliance with the service obligation requirement. We interviewed the IHS program analysts responsible for maintaining and reviewing the files of the 32 recipients and confirmed that IHS did not verify that the recipients had begun their service obligations. For the remaining two recipients, IHS's documentation contained evidence demonstrating that the recipients had begun their service obligations.

Before our review, IHS had made only limited attempts to contact recipients who had not submitted evidence of fulfilling their service obligations. We found that IHS had requested from only 6 of the 32 recipients evidence of fulfilling their service obligations and did not follow up with the recipients who did not provide the requested documentation. In addition, during our fieldwork, IHS requested from 10 of the 32 recipients evidence of employment. Only five of these recipients submitted to IHS evidence of beginning their service obligations.

## **RECOMMENDATION**

We recommend that IHS follow its policies and procedures to verify that recipients of Indian health professions scholarships complete approved education programs and fulfill required service obligations.

## **INDIAN HEALTH SERVICE COMMENTS**

IHS concurred with our recommendation and described actions that it had taken or planned to take to address the recommendation. IHS's comments are included in their entirety as the Appendix.

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<sup>3</sup> The remaining 10 recipients consisted of 6 recipients who were in the process of completing education programs, 3 recipients who had the service obligation deferred to a later period, and 1 recipient who was in the process of securing employment.

<sup>4</sup> At the time of our review, based on IHS's documentation, none of the 44 recipients had served long enough to fulfill their service obligations.

# **APPENDIX**

## APPENDIX: INDIAN HEALTH SERVICE COMMENTS



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Indian Health Service  
Rockville MD 20852

APR 5 2011

TO: Inspector General

FROM: Director

SUBJECT: Response to the Office of Inspector General "Audit of the Indian Health Service's Internal Controls over Monitoring of Recipients' Compliance With Requirements of the Indian Health Professions Scholarship Program (A-09-09-00044)"

The purpose of this memorandum is to respond to your January 19, 2011 memorandum transmitting the Office of Inspector General (OIG) draft report providing the results of the OIG "Audit of the Indian Health Service's Internal Controls over Monitoring of Recipients' Compliance With Requirements of the Indian Health Professions Scholarship Program (A-09-09-00044)." I appreciate the opportunity to address your recommendation.

*OIG Recommendation:*

*(1) We recommend that IHS follow its policies and procedures to verify that recipients of Indian health professions scholarships complete approved education programs and fulfill required service obligations.*

**IHS Response:**

We concur. In April, 2010, the Indian Health Service (IHS) began an initiative to develop and implement more effective internal controls over recipients' compliance with requirements of Indian Health Professions Scholarship Program. The initiative's objectives include processes to monitor and document recipients' fulfillment of education requirements and their completion of required service obligations.

Specifically, IHS will monitor recipients' fulfillment of education requirements such as maintaining full-time enrollment until completion of their education program while meeting the minimum level of academic standing. IHS will also monitor recipients' completion of required service obligations (recipients must fulfill a minimum service obligation of two years).

Plan to Strengthen Internal Controls:

- 1) Monitoring recipient completion of their education program:
  - a) The IHS Scholarship Program (IHSSP) is revising its Standard Operating Procedures Manual (last edition, Oct 2008) to address the technical details for monitoring recipient compliance with program policies and procedures and the timeline for each analyst's

Page 2 – Inspector General

function related to this monitoring process. The manual will be completed by September 2011 with staff updates and trainings completed by October 2011.

- b) The IHSSP is revising the “in-school”, “in-deferment,” and “in-service” policies, procedures, and reporting requirements affecting Section 103 (Preparatory and Pre-graduate) and 104 (Health Professions) recipients in the IHSSP Student handbook. The handbook update will further detail for recipients their responsibilities for academic performance, graduation, service obligation payback, and Default/Waiver. This update is scheduled to be completed by October 1, 2011.
  - c) The IHSSP received OMB approval in August, 2010 for significant forms revisions that will affect both the applicant and recipient beginning in Academic Year 2011-2012. These forms and their use are supported by explanations as to when they are to be used and to whom they are to be delivered to maintain compliance with the recipient’s contractual reporting requirements throughout all phases of a recipient’s “active status” with the IHS Scholarship Program.
  - d) The IHSSP analyst staff are now required to contact each scholarship recipient semiannually throughout all phases of their “active” life cycle with the IHSSP and to document this communication in both the scholarship database and recipient’s hard copy files.
  - e) The IHSSP set aside funding to implement expanded electronic automation for maintaining/monitoring recipient reporting and progress throughout all phases of the recipient’s “active status” life cycle with the IHSSP.
- 2) Monitoring recipient completion of their service obligation payback:
- a) The IHSSP performed a scholarship file review activity for recipients funded between 2005 and 2008. The review included contacting recipients who failed to provide required documentation related to completion of their education, completion of approved post-graduate training, certification/licensure, or service obligation payback. This review effort has resulted in electronic and hard copy official scholarship files being complete in accordance with reporting requirements; recipients identified as never or partially fulfilling their service obligation payback are being referred to the Program Support Center - Debt Management Branch for Default processing/Debt Collection. Recipients identified as having met all reporting requirements and satisfactorily completing their service obligation payback were sent official completion letters from the IHSSP.
  - b) The IHSSP analyst staff is now required to contact each scholarship recipient graduate semiannually throughout all phases of their “active” life cycle with the IHSSP and to document this communication in both the scholarship database and participant’s hard copy files.

Page 3 – Inspector General

Thank you for the opportunity to respond to your January 19 memorandum. If you have any questions concerning this response, please contact CDR Michael D. Weahkee, Deputy Director for Personnel Functions, Office of Management Services, IHS, at (301) 443-6290.

A handwritten signature in cursive script, reading "Yvette Roubideaux".

Yvette Roubideaux, M.D., M.P.H