

National Indian Health Board Monthly Board Briefing Call

Thursday, September 27, 2018, 1:00 pm Eastern Time

Roll Call:

Alaska Area: Chairman Bill Smith

Albuquerque Area:

Bemidji Area:

Billings Area:

California Area:

Great Plains Area:

Nashville Area:

Navajo Area:

Oklahoma City Area: Acting Executive Director Nick Wahpepah, Chairwoman Marty Wafford

Phoenix Area: Chairman Hawley

Portland Area:

Tucson Area: Director Reuben Howard

National Indian Health Board Staff: Stacy Bohlen, Carolyn Hornbuckle, Robert Foley, Caitrin Shuy, Sheri Patterson, Jennifer Vigario

Notes:

NIHB CEO Stacy A. Bohlen called the meeting to order and asked everyone on the call to identify themselves.

Report of Secretary's Tribal Advisory Committee Meeting (Sept. 24-26, 2018) from Carolyn Hornbuckle

- Framework put together on Sunday 9/23, Meeting Monday 9/24 and Tuesday 9/25
- Tanana Chiefs hosted the meeting, showcased local area work with HHS
- The meeting included a budget update, as well as briefings from: the Administration for Community Living, Health Resources and Services Administration (HRSA), Administration for Children and Families, Centers for Disease Control, Deputy Secretary of Health and Human Services and the Indian Health Service. There was also a briefing on Tribal Consultation and a special session for opioids.
- Update on Centers for Medicare and Medicaid Services (CMS): There was lot of discussion in regard to the Medicaid work requirement issue. Tribal leaders informed CMS that the policy would have negative impact in Indian Country due to reliance on CMS and third party billing. Currently there is no federal exemption for tribes it is up to states to decide to offer a waiver. The agency has wavered on what it will do to protect tribes and has shared conflicting guidance. Still no blanket exemption, but may approve other types of protections coming from states. The STAC emphasized the horrible impact this will have on third party receipts, care and tribal health overall. The Agency shared that it was still trying to get information from Tribal Councils. Tim Hill, Acting Deputy Administrator and Director for CMS was there to represent them and fielded questions from Tribal leaders to take to legal counsel. Tribal leaders asked, "what was the triggering event?" "what was the trigger language?" in regard to making the work

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requirements race based. The STAC has decided to make a resolution (which is not normal, they usually send letters) demanding Tribal Consultation since no meaningful Consultation was held to discuss state waivers. The STAC asked for NIHB's assistance with this endeavor. Carolyn Hornbuckle is assisting to write the resolution and will send to STAC leaders for consideration and approval. There was a question raised by Stacy Ecoffey to see if STAC can make a resolution. Per Carolyn, their legal research so far says they can.

- One additional update from CMS is that they didn't approve Washington State's state plan amendment- this is not related to work requirements, it has to do with the DHAT program structure.
- Update from the Indian Health Service given by RADM Weahkee
 - o He has timed out as Acting Director, so the agency currently lacks a Director and Acting Director. He is still in the top spot as appointed by the HHS Secretary. He shared that if Tribal Leaders would like him to stay on as the head of the agency, he would be pleased to serve at the pleasure of the Secretary for Health and Human Services and the Tribes. He addressed concerns about the Uniformed Public Health Service staffing cuts. It has been proposed for them to be cut 40%, and has not yet taken effect. RADM Weahkee said there is pending legislation that would allow officers to select the VA as a service location and he is also very concerned with that.
 - o Special Opioids Session- heard from a Tribal leader in the Nashville area. Their tribe had 5 substance abuse related suicides. Tribal leaders commended the Department of Health and Human Services on mounting an interagency effort, however there are a number of high priority items to address. Tribal leaders said that grants are not always the best way to give funding, the agency should look at ways to funnel funding to the IHS so that formulas may be used. The issue with grants is that they need to be applied for and tracked- some tribes lack the resources for that. The funding should be flexible. State and Tribal relations vary by area- some good, some not good. The funding is still not enough even though significant funds have come through. There are critical needs in the workforce for behavioral health workers.
 - Comment from Director Reuben Howard in regard to SAMHSA Grants: his tribe submitted a proposal for the allocation and they got \$200,000 more than submitted, concerned because RFPs came out late. Concerned that some tribes aren't applying for the grants. At the next quarterly meeting of the NIHB, there should be a discussion with SAMHSA about where do we go from here?
 - Carolyn Hornbuckle responded: there was a rush for the grants and for the Agency to get the information out. At the STAC meeting they shared that not every Tribe applied. They felt that leftover money would send a bad signal to Congress that the money was not needed. That is why tribes with strong applications got more

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than they asked for. Concerns similar to Reuben's were shared at the meeting regarding small tribes that lack the resources to have grant writers and respond by the deadlines. Tribal leaders suggested interagency agreement needed for funding to flow out in an automatic fashion. There is a lack of agency understanding on differences between the Areas and how to distribute funding. Perhaps NIHB can do work to gather information for the agency on how to move forward.

Opioid and Regulatory Update- Caitrin Shuy and Stacy A. Bohlen

- The Comprehensive Opioid Addiction Act- HR 6 has passed both Congress and the Senate. There is a \$50 million tribal set aside (State Opioid Response Grants) and 3% maternal and child health. NIHB advocated for tribal provisions. When the Senate bill came out, states were encouraged to collect Tribal data- but that is problematic. Technical assistance was requested by NIHB and put into the bill. NIHB will send out a more comprehensive write up.
- Update on Labor HHS Appropriations bill- reiterated victories that were sent in our legislative action alert, including the doubling of funding for the Good Health and Wellness in Indian Country program and inclusion of tribal sovereignty language. The Dept of Interior bill was not fully funded- that is where IHS is. It is being funded by a continuing resolution right now and hopefully will be voted on during the lame duck session.
- NIHB attended the Senate Democratic Caucus Rural Summit on 9/27/18. It was a gathering of Democratic Senators to speak about issues in Rural communities. Stacy spoke on a panel and talked about the trust and treaty responsibility and how Tribal communities can be models. Senator Heitkamp (North Dakota) was pleased to hear her comments. Senator Shaheen (New Hampshire) was interested in our work. When NIHB was invited, we offered to bring a Tribal leader but the group declined.
 - o Question from Director Reuben Howard- How will the opioid money be funneled to Tribes? Caitrin: language is similar to last year, need to speak with SAMHSA.

Update on Healing Our Spirits Worldwide Conference, Robert Foley and Stacy A. Bohlen

- Chairman Hawley to deliver the AI/AN Keynote Address at the HOSW Worldwide Conference in Sydney. Working on writing the remarks and travel arrangements.
- NIHB staff Stacy A. Bohlen, Robert Foley and Devin Delrow will attend
 - o There will be a meeting of the International Indigenous Health Collaborative during the conference
 - o NIHB is setting up meetings with 6 Australian indigenous groups at the conference
 - o NIHB will go to New Zealand when conference concludes- to spend 2 days around Auckland, spend 3 days on the road in the North Island to visit 4 different villages and their health clinics. This trip will conclude on Dec. 9th or 10th.

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- A strategic planning meeting after the National Tribal Health Conference to make the Indigenous Health Collaborative look more appealing to partners and funders.
- Proposal to hold workshops on SDPI at Healing Our Spirits Worldwide- The Tribal Leaders' Diabetes Committee (TLDC) invited Stacy to speak at their quarterly meeting and they are interested to attend the conference to share the successes of the SDPI program and model. The TLDC asked NIHB to write a letter to RADM Weahkee to request funding. NIHB will assist to prepare proposals for two workshops:
 - 1) How did we get here? Law and policy construct for the Special Diabetes Program for Indians
 - 2) Workshop with SDPI program administrators speaking about the Tribal administration of the program from a variety of Tribal perspectives.
- NIHB attended Pew Charitable Trust event Opioids Across Borders on 9/24. NIHB was the only AI/AN organization invited. Stacy's counterpart from the First Nations was present, number of possible funders there. Stacy talked to the Pew Charitable trusts about how/why Tribes were missing from the agenda since we are sovereigns. Discussed the possibility to do a follow up session with Tribes and government representatives.

Planning the Next Board Meeting, November 8th and 9th in Washington, DC

- Follow up Items from previous Board meeting. The Board asked for two things after the last meeting:
 - 1) Briefing on Marijuana in Indian Country
 - 2) NIHB to host High Tech Summit- After discussing with our staff, idea to put together such a Summit with the Tribal Public Health Summit in Washington DC in Spring 2019 or the Winter 2019 Behavioral Health Conference or have it be free standing. Suggesting it to be part of TPHS due to difficulty in getting folks from government organizations to attend these events due to travel and expenses. Thought better attendance if it took place in Washington DC.
- There will be an election briefing since this is right after the midterms
 - Will bring a schedule of proposed conference dates/locations
 - Requested Board feedback and guidance, desired speakers/topics for this meeting. Please send to Stacy Bohlen, Chairman Hawley and copy Jennifer Vigario by email.

Update about the National Tribal Health Conference, Stacy A. Bohlen and Robert Foley

- Tremendous thanks to the Southern Plains Tribal Health Board for all of the support and Marty Wafford too.
- Robert Foley was the lead organizer for NIHB, very big thank you to you, too for the tremendous leadership
 - Had a large staff and volunteer contingent for this conference- helped to ease common conference issue
 - Over 600 attendees, over 50 exhibitors
 - Over \$70,000 in sponsorships

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- We worked very closely with the SPTHB volunteers and that was different from before- it went well
- Added extra block of workshops, also went well
- Any questions or reflections from the Board?
 - Nick Wahpepah- Stacy and Robert did a wonderful job and saw the immense value in the conference and who the speakers were, NIHB staff were professional and go-go-go, you all blew my mind. Hope we get the opportunity to work together again.

Upcoming Meetings and Events

- Direct Service Tribes Advisory Committee Meeting, Washington, DC (Oct 2-3, 2018)
- Tribal Self Governance Advisory Committee Meeting, Washington, DC (Oct 3-4, 2018)
- Seeds of Native Health Conference, Prior Lake, Minnesota (Oct 3-5, 2018)
- Tribal Sovereignty in Person Follow up Meeting, Washington, DC (Oct 5, 2018)
- NCAI National Conference, Denver, CO (Oct. 21-25, 2018)
- NIHB Monthly Board Briefing Call at 1pm Eastern Time (Oct 25, 2018)
- NIHB 4th Quarter Board Meeting, Washington, DC (Nov 8-9, 2018)
- MMPC Face to Face Meeting, Washington, DC (Nov 14, 2018)
- TTAG Meeting, Washington, DC (Nov 15-16, 2018)
- Healing Our Spirits Worldwide, Sydney Australia, (Nov 26-29, 2018)