

**Senate Bill 770 Health Services Cluster Meeting
Grand Ronde, Oregon
September 18, 2007**

Attendees:

Rick Acevedo	DHS, Director's Office
Diana Woods	DHS, Director's Office
Michelle Bergan	Confederated Tribes of Grand Ronde
Sonciray Bonnell	Northwest Portland Area Indian Health Board
Norma Cummings	Klamath Tribal Health
Jim Edge	DHS, Division of Medical Assistance Programs
David Foster	Oregon Housing and Community Services
Kelly Hawk	Klamath Tribes, Contract Health
Linda Hettinga	Yellowhawk Tribal Health Center
Ron Hudson	Confederated Tribes of Grand Ronde
Deborah Jackson-Alvarez	Indian Health Services, Warm Springs Service Unit
Catherine Katchia	Confederated Tribes of Warm Springs
Ruth Kemmy	Department of Consumer and Business Services
Allyson Lecatsas	Confederated Tribes of Grand Ronde
Kelle Little	Coquille Indian Tribe
Rebekah Main	Confederated Tribes of Warm Springs
Tresa Mercier	Confederated Tribes of Grand Ronde
Kelly Nelson	Confederated Tribes of Grand Ronde
Elwood H. Patawa	Confederated Tribes of Umatilla
Michael Stickler	DHS, Federal Financial Policy Analysis
Cheryl Stinnett	Chemawa Indian School
Ron Soto	Oregon Commission on Children and Families
V. Guy Wallwatum	Confederated Tribes of Warm Springs
Diann Weaver	CLUSTI

Rick called the meeting to order at 9:10 a.m. Ron Hudson gave the invocation. Roundtable introductions were made.

DHS Budget and Legislative Update – Bruce Goldberg

- The legislature made investments in daycare, increasing both subsidies as well as eligibility for families.
- There were a lot of investments in mental health and substance abuse treatment and prevention, as well as some investments to tribal prevention programs.
 - All tribes are now at or above \$50,000 in prevention funds.

- There was a \$10 million investment across the board in substance abuse treatment geared toward families who are at risk for having children in with the child welfare system.
- Investments were made for the community mental health system. DHS is building two new state hospitals – psychiatric facilities of recovery, not institutions.
- The legislature made no investment in the Oregon Health Plan.
- Not a lot of investment in senior programs. DHS will be doing a lot of work in the interim and come back at the next session as a priority.
- Another big investment was in the new TANF program with a post-TANF piece to assist families once then have been through TANF and have jobs, it is an ability to maintain some support for those families.
- SB 329 is the state's effort at a broader health care reform effort. A 7-member health board was set up with members chosen by the Governor. Their charge is to create a system that will provide basic health care for everyone in the state.
 - The Board has 1½ year to develop a proposal for the next legislative session.
 - They are in the process of forming committees and subcommittees.
 - They want to make sure tribal voices are heard as part of the process.
 - Anyone interested in being part of the committees, let Rick Acevedo know.
 - The Health Fund Board was chosen not because they have any background in health, but because they represent business and public interests.

Action Item:

- Barney Speight, Director Health Fund Board could be invited to the next tribal meeting.
- Since the Board was just named and have not yet met, it would be a good time for the Board to meet with tribal health directors. DHS will facilitate the best way to make that happen.

Tribal Updates:

Debra Jackson – Confederated Tribes of Warm Springs, Indian Health Services

- No replacement yet for Jim Quaid's position.
- Looking forward to the possible opening of the OHP Standard program.

Rebekah Main – Confederated Tribes of Warm Springs

- Working on grants, Region X items and disaster plan.

Guy Wallwatum – Confederated Tribes of Warm Springs

- Looking at the Christie Care contract.

Catherine Katchia – Confederated Tribes of Warm Springs

- Health and Welfare Committee is up to four committee members.
- Behavioral risk was just completed.
- Health educator just retired and are looking to fill that position.

Dianne Weaver – Confederated Tribes of Coos, Lower Umpqua & Siuslaw

- Have four interviews scheduled for the health director position.
- Family Services Coordinator/ICWA worker also left.
- CHS manager attending training in Seattle and found it to be very informative.
- New casino in Florence is scheduled to open in November.

Kelle Little – Coquille Tribes

- Spending a little bit less in contract health compared to last year. Requiring tribal members living in the five county service area to go to use primary care providers and those residing in Coos County to use community health center. The tribe contributes at least 40% of CHS funds.
- Consortium with Klamath tribe and Cow Creek on the diabetes prevention program now in fifth year. Siletz offered the use of their facility and four Siletz tribal members are in the program. Recruiting heavily for this program; must have at least 16 members participating in the program.
- Social Services Division's challenge is no tribal foster care homes. Trying to find incentives to encourage families to become foster parents.
- Working on emergency health preparedness plan.

Mark Johnston – Confederated Tribes of Grand Ronde

- The clinic is having issues with access to care. Looked at why and made significant changes to address those issues. Volume has increased at least 50% and expects to increase 100% when process is complete.
- Adult foster care homes are open with 10 tribal elders living there.

Woody Patawa – Confederated Tribes of Umatilla

- Currently in the 2008 budget review process.
- In process of recruiting for a physician and health educator.
- Reviewing contract health and will be making policy changes.
- MOU with Walla Walla VA Medical Center.
- Tribal elections will be held in November.

Ron Hudson – Confederated Tribes of Grand Ronde

- Meth conference was held last week and 150 people were in attendance.
- Looking forward to the ICWA conference next week at Warm Springs.
- Earlier this month we met with Christie School on the development of a residential treatment care for Native Americans.
- Last week we were part of the federal review of the child welfare program that went well.
- Ron was concerned about the minutes from the past meeting regarding juvenile justice. Ron attended the meeting where juvenile justice determined the amount of money for the tribes.
 - Dave Fullerton is the tribal representative on that board and he followed up and it was the understanding that what was agreed to was changed and he was not part of that process.

Cheryl Stinnett – Chemawa Indian Health Center

- Kate Culbertson is the new CEO and has been on the job for two weeks.

Norma Cummings – Klamath Tribal Health

- The new doctor started first part of the month.
- Still looking for pharmacist.
- Just hired a new employee to help with the diabetes program and still looking for more applicants.
- Looking at expanding the casino and adding a hotel section.
- Looking at forming a list to identify high-risk people should the OHP Standard program reopen.

Kelly Hawk – Klamath Tribes

- Working on Medicare like rates for contract health, specifically the outpatient pricing system.
- Have already had three SCHIP cases and have three more are pending. Have saved approximately \$55,000 so far on the three claims processed on Medicare like rate savings.

- Tribal Health is moving forward on accreditation and Julie Mariam is the new physician at the wellness center.
- Looking into electronic health records to see if the wellness center wants to do.
- Klamath Tribe is seeking information on self insurance.

Sonceray Bonnell – Indian Health Board

- Annual Consumer Conference on Sept. 24-28 at the DoubleTree Lloyd Center in Portland. Monday night the NPAIHB will be hosting a reception and will be offering tours of their facility. Wednesday night is culture night.
- Quarterly board meeting is October 16-18 in Lummi, WA.

Oregon Health Plan – Jim Edge

Waiver Request

DHS has not received an answer from CMS on the waiver on the OHP Plus benefit package. CMS believes this is a civil rights issue. DHS has asked them to even give us a no, because the tribes are willing to challenge it through the court system. CMS will not give us an answer.

The waiver was requested by DHS to CMS which would give a richer benefit package to tribal members on OHP Standard program since that is 100% federal money. Their legal team in Washington DC got involved and decided that was discrimination to give a different benefit package do this and it is a civil rights issue.

In past years, under other administrations, they allowed Medicaid programs to treat tribal members differently. When they changed the Medicaid program, it was set it up as 100% federal money.

Opening OHP Standard

OHP Standard benefit package was added in 1994 serving everyone who was below 100% of the federal poverty level. During the 2002-03 legislative session, all of the money was pulled out of the OHP Standard program. DHS was able to use money from provider taxes to keep the program funded for 24,000 people, but it was closed for everyone else. Through attrition, the program is now down to about 19,000 people and DHS is looking at reopening that program, but not very much. The plan is to create a reservation list and from that list, send out a limited number of applications.

About a year ago DHS requested permission from CMS to allow us to create a reservation list. DHS has conducted a number of meetings with staff and stakeholders regarding the list. Once approval is received, DHS will open the reservation list several ways: email, fax, (name, address, phone, DOB) mail, phone. In order for this process to be fair, DHS will do a random draw from the list and send applications to those people. Tribal clinics and administration may assist people when the reservations begin.

Healthy Kids

The Healthy Kids program is a bill that was referred to the voters by the legislature that would establish health insurance for all children in Oregon. It would expand the State Children's Insurance Program (SCHIP) by raising the federal poverty level up to 200% which would allow more children into the program. It would expand the ability for the Family Health Insurance Assistance Program (FHIAP) to pay for health insurance for more children who are getting employer sponsored and would establish a new private insurance program for higher income children who do not currently have insurance.

If ballot measure 50 passes in November, enough money generated from the tobacco tax to also add 10,000 more people to the OHP Standard program.

SCHIP Program

The reauthorization of the SCHIP program is at the federal level. SCHIP pays for health insurance for children up to 185% of the federal poverty level in Oregon. This program expires at the end of this month. Both the House and Senate have passed bills to reauthorize and expand this program, but the President promises to veto either one. Last weekend both the House and Senate agreed on a compromise bill and the President said he will veto this one also. It is unsure if there are enough votes to overturn a veto. If either of the bills passes, it will be funded by a federal tobacco tax.

SB 329

SB 329 would move Oregon closer to universal health care.

Additional item of interest

There is a requirement that was slipped into the budget bill for the Iraq war, for Medicaid prescriptions written after October 1 must be written on tamper resistant prescription pad. It does not apply to phoned-in prescriptions, faxed prescriptions, or electronically sent prescriptions. It applies only to prescriptions that the patient received from a doctor and hand-carries to the pharmacy. The problem is that

doctors do not have the prescription pads yet. Most pharmacies and doctors offices are dealing with this and are working around it. There is a provision that if a paper prescription is filled and is verified within 72 hours would qualify as tamper resistant.

ChristieCare – John Spence & Chris Larson

ChristieCare is the largest and oldest child-serving residential care facility in the state, providing high-end mental health services to youth up to age 24.

ChristieCare won the bid for the old Riverbend facility on the banks of the Clackamas River in Oregon City. ChristieCare wanted to help tribes get access to care for children and decided to develop a native-specific youth treatment facility that will be opening on October 15, 2007.

Inpatient mental health is very expensive \$10-15,000 per month. The State of Oregon does not have the 40% match to serve a 24-bed program start up. If the patient is a member of a federally recognized Indian tribe and the tribe provides the service and the tribe bills for that service, then the reimbursement can be 100% of the cost. If the state provides the service or bills for the service, it becomes a 60/40 split. To make this a viable program and get the 100% federal reimbursement, the tribes must be the referring agency. The contract will be between the tribes and ChristieCare. ChristieCare will then bill the tribes for the service and then in turn submit a bill to the state, the state will pay or reimburse the tribes and then the state will collect 100% of the funds back from the federal government through 100% FMAP. Descendent children are not eligible for the 100% FMAP but are still eligible for treatment.

ChristieCare is now looking for about eight referrals. Educational services will be provided from Serendipity to help get kids back on track with their schooling. Participation by family members, as well as the tribes will be built in to the program. The tribes will have control over the treatment of their children.

Liaisons Report

David Foster - Oregon Housing and Community Services

- The agency focuses is on affordable housing. They have first-time home buyer programs and community services programs (emergency assistance programs). If anyone has questions or concerns contact David at (503) 986-2112.
- The Legislature restored some of the programs that were previously cut.

- There was a major initiative to establish a recording fee on documents to fund affordable housing, that bill did not pass, but watch for it in the future.
- Working with Klamath Tribe on food warehouse.
- Umatilla tribe has received some good recognition on the individual development account initiative.
- Key legislative initiative focused on a policy advisory group to develop a plan to end chronic homelessness in 10 years.
- Everyone needs to watch housing right now – sub-prime lending issue, rent increasing, etc.

Ruth Kemmy – Department of Consumer and Business Services

- The department is the largest regulatory agency in the state and deal with issues such as consumer concerns on foreclosure. For information, please contact the Division of Finance and Corporate Securities at (503) 378-4140.
- ID theft is another big issue dealing with private information. For more information contact Diane Childs at DCBS (same number as above).

Ron Soto – State Commission on Children and Families

- There has been considerable discussion around the allocation of funds for the Juvenile Crime Commission grant centering on a cost plus concept versus a minimum grant concept. This was a complex issue and meetings were held to gather feedback. The conversation will continue over the next year to gather more input.
- Consultant liaison position with juvenile crime prevention and looking to contract with an individual. The Commission wants to communicate directly with the tribes and develop a relationship. They recognized the need for a consultant liaison in order to get some of the strategic planning processes done. An RFP will be out soon. OCCF wants to give tribes equal time when it comes to talking about issues just as the counties do.
- A handbook was developed on tribal juvenile crime prevention and is now in the draft stage. Copies will be sent out to some of the tribes for feedback.
- An email was sent out asking all the tribes if there had been any changes from the last biennium. If not, send a response email indicating no changes and the last biennium work plan will be the same as the last one.

Michael Stickler – DHS, Federal Financial Policy Analysis

- Working with Rick Acevedo and the Christie School on billing and other opportunities for the tribes to engage for utilized federal funding. Discussing potential issues that may come up so that if another tribe has a similar

situation, we have a way to resolve it. If anyone has any issues or concerns, contact Michael at (503) 947-5413.

Lynda Dyer – SPD

- 3rd Annual Native Caring Conference will be held on October 10-11 at the Wildhorse Casino in Pendleton. Registration forms are available.

Randy Blackburn – CAF

- The Annual ICWA Conference will be held Sept 26-27 at Kah-Nee-Ta.
- Child and Family Services review was held focusing on practice and not so much on compliance, and some eligibility. This is the second round reviews for state and so far no state has passed. What will happen next is the program improvement plan and we have a year to fix the problems.
- The State Automated Child Welfare Information System (SACWIS) is in the final stages of vendor selection and will be coming on board by February 2008. This will be a 2-3 year project to implement the system.
- SB 1956 – federal legislation called Tribal Foster Care and Adoption Access 2007 to fund directly to tribes the Title IV-E so tribes would no longer have to go through the state to have access to those funds. This would also require tribes to do all of the reporting.

Next Meeting

The Government-to-Government Summit is scheduled for November 8 at Kah-Nee-Ta, so the quarterly will be on November 7 also at Kah-Nee-Ta. The agenda will be sent out prior to the meeting.