

IHS/CAO TRIBAL ADVISORY COMMITTEE MEETING
October 27, 2010
EXECUTIVE SUMMARY

**Members in
Attendance:**

**Region
Represented**

Mr. Peter Masten Jr.	Northern
Mr. Rick Maddux	East Central
Ms. Rachel Joseph	East Central
Ms. Beverly Rodriquez	West Central
Mr. Chris Devers	Southern
Mr. Johnny Hernandez	Southern
Ms. Patricia Schoolcraft-Alternate	Southern

IHS Staff In attendance:

Ms. Margo Kerrigan	Director, California Area IHS
Ms. Beverly Miller	Deputy Area Director
Dr. David Sprenger	Chief Medical Officer
Mr. Ed Fluette	Associate Director-OEHE
Mr. Travis Coleman	Acting Indian Self-Determination Program Mgr.

The California Area Tribal Advisory Committee (CATAC) meeting began on October 27, in the conference room at the John E. Moss Federal Building, Indian Health Service (IHS), California Area Office, 650 Capitol Mall, Suite 7-100, CA 95814. In addition to the attendees listed above, this meeting was open to and attended by additional Tribal Leaders, Program Directors, and IHS staff.

Ms. Kerrigan, California Area Director, IHS welcomed everyone and facilitated group introductions and reviewed the planned agenda (see attached).

Executive Summary Review:

The CATAC members reviewed the Executive Summary of the June 29, 2010 meeting and approved them with one correction to IHS Deputy Director for Management Operations, Robert McSwain's language to "comparison revealed" in current funding.

Youth Regional Treatment Center (YRTC):

Ms. Kerrigan discussed her request for Tribal consultation on the four options for Honeyrock (see *Northern California YRTC Update*, September 29, IHS/CAO) and described an October 14 meeting in Sacramento with Butte County residents who represent the opposition to the Honey rock site;

- At the meeting Ms. Kerrigan offered to arrange a visit for up to six residents to the Healing Lodge in Spokane so they could see the facility, meet the clients, talk with staff and neighbors of the YRTC, and see that their fears are unfounded. Portland Area Office is assisting in planning the trip, which will most likely happen in December 2010. So far, though, only one resident has responded.
- At the meeting, residents were adamant that while the need for an YRTC exists, it should not be at Honeyrock. They claim it is not a “NIMBY” issue but rather the YRTC would be inconsistent with their plans to develop a community of micro-farms, such as olive groves and small vineyards. Ms. Kerrigan assured the residents that the YRTC will have an agricultural element in its occupational therapy treatment plans.
- However, she feels they have made up their minds, and cannot be persuaded. Privately, one resident told Ms. Kerrigan, “We know you are going to build it, but we don’t want it at Honeyrock.”
- Mr. Rocky Deal, District Director for Congressman McClintock was present at the October 14 meeting. Mr. Deal stated that the Congressman would support any site IHS chooses for the YRTC (other than Honeyrock), if the Butte County Board of Supervisors voted 3 to 2 in favor. Ms. Maria Hunzeker, Executive Director of the Feather River Tribal Health program is coordinating an effort for the Tribes to dialogue with the individual Butte Supervisors (see summary of October 25 Tribal Leaders’ Conference Call).
- While IHS/CAO is likely to prevail in purchasing Honeyrock, IHS/CAO will require the County’s cooperation during construction of the YRTC. The Federal Supremacy clause paves the way to acquire the property and allows IHS/CAO to build the facility without County approval; however, it does not guarantee access to County-infrastructure during construction (e.g., power, water, transportation).

Following the presentation about the current status at Honeyrock, there was considerable discussion.

Chairman Devers stated that it is the practice in the South to defer to the northern Tribes on issues in the North. They support moving forward with Honeyrock, based on the northern Tribes feedback during the October 25 conference call. Ms. Rodriguez added that there will always be opposition by the community when attempting to develop an IHS or Tribal facility. IHS/CAO should continue to move forward at Honeyrock.

Chairman Hernandez stated that IHS/CAO should build the facility at Honeyrock despite the opposition. Ms. Kerrigan needs to take the lead in this effort and take a stand against the opposition. Chairman Hernandez recommended that IHS/CAO establish a Facebook page and website to show that YRTCs are successful and Chairman Devers and Mr. Masten concurred. The Website should include testimony from former YRTC clients. This action would be in line with what Tribes have told Dr. Yvette Roubideaux, Director of Indian Health Service which is to do more outreach via Internet.

Chairman Devers, Chairman Hernandez and Mr. Masten commented that IHS/CAO has been “doing everything by the book” regarding the northern YRTC, and has reached out to the community. They encouraged IHS/CAO to seek legal remedies to the problems in the North at this point. Ms. Kerrigan will consult with the Office of General Counsel (OGC).

Ms. Joseph commented that during the October 25, conference call, four Tribes from East Central region expressed support for IHS/CAO in pushing forward with Honeyrock. Ms. Joseph recommended giving Ms. Hunzeker time to build support among the Supervisors while pushing forward with construction in the South. She also suggested that IHS/CAO consider solar power at Honeyrock to support development if there are power disruptions.

Mr. Masten stated that last week, the Hoopa Valley Tribe took formal action in support of Option #2 (proceed with Honeyrock, perform additional community outreach, develop a backup plan). IHS/CAO should publicly emphasize the importance of Tribal consultation in the YRTC project. IHS/CAO needs to do more to build alliances in the Butte community and consider building alliances with Oroville City Council, emphasizing the business that the YRTC will bring to the city. “IHS/CAO should also document that the Butte Planning Department has stated that it will not cooperate with IHS/CAO during the development at Honeyrock.”

Chairman Devers, Chairman Hernandez, Ms. Joseph & Mr. Masten all recommended that IHS/CAO develop conceptual plans/drawings for the southern YRTC as soon as possible. The Tribes need to see these plans to inspire hope within their communities, regardless of location –IHS/CAO must demonstrate that the projects are moving forward. In addition, CATAC members recommended that IHS/CAO should publicize these plans and get them in the press, especially in the North. CATAC members asked if IHS/CAO has additional funds to develop plans immediately. Mr. Flutte answered that the total budget for purchasing the properties is \$2.7 million. Total purchase price is approximately \$2 million, leaving \$700,000 that could be spent on conceptual plans/drawings.

Ms. Joseph stated that IHS/CAO had been reporting that escrow would close in the South in December. IHS/CAO is now reporting that it will close in January, and she wanted to know why Mr. Flutte responded that there has been a delay in the paperwork. However, OEH&E in Dallas has indicated it will approve the paperwork quickly. Ms. Kerrigan stated that she wants escrow closed in the South before the end of January. Chairman Hernandez stated that in March, IHS/CAO needs to report to the Tribal Leaders that escrow is closed in the South.

Indian Health Care Improvement Act (IHCIA)

Ms. Kerrigan described a Dear Tribal Leaders letter dated July 22, 2010 from Dr. Roubideaux that addresses the current status of each element of the IHCIA and the Affordable Health Care Act. Ms. Kerrigan also discussed an agreement between IHS & the Veteran's Administration (VA) that is on the verge of being signed and that should help with billing. Ms. Joseph stated her feeling that Tribal Veterans concerns have not been voiced. Chairman Hernandez commented that there has not been Tribal consultation from VA or Dr. Roubideaux.

Ms. Joseph stated that the VA should pay if a veteran comes to our clinic since the IHS is a payer of last resort. Chairman Devers wanted to know who is watching this and Ms. Kerrigan stated it was Dr. Susan Karol, Chief Medical Officer at IHS Headquarters in Rockville, MD.

Chairman Devers stated that looking at it should be an on going process. When we have the Tribal Leaders' Consultation Conference in March there should be something positive to report. Ms. Kerrigan stated that two months ago she asked the VA to do a data match. Steve Riggio, Associate Director IHS/CAO, Office of Public Health is working with the VA to complete this.

Chairman Hernandez stated that the Contract Health Service Delivery Area (CHSDA) definition is the problem. Ms. Joseph stated that veterans are not being served because they are not covered by the CHSDA. She feels they could be transported to Tribal or Urban clinics and get paid by VA. She recommended a subcommittee or taskforce to look out for these veterans and see how we can serve those that are not in an area being covered, maybe by using a mobile unit. Dr. Sprenger mentioned that some VA facilities have tribal VA liaisons.

Chairman Devers asked if the federal health insurance the same as those offered to the tribes.

Ms. Kerrigan responded that the federal health insurance may not be better than their clinic's. Some have dental, eye care you need to read to compare whether your clinic would benefit with the federal insurance.

Ms. Joseph recommended a North and South meeting on IHCIA provisions and federal health insurance.

Ms. Kerrigan stated that this would require that the Office of Personnel Management (OPM) to be involved.

Chairman Hernandez said that he will ask for a National Indian Health Plan.

Ms. Joseph requested at the Tribal Leaders' Consultation Conference if we could have Myra Munson present.

Ms. Kerrigan stated that the agency is limited in discussing the IHCIA. Because of this, Ms. Kerrigan deferred to the documents available on the IHS Director's Blog.

Catastrophic Health Emergency Funds (CHEF)

Chairman Hernandez asked why California CHEF claims go through the Area when other Areas go directly to Mr. Clayton Old Elk, Health Systems Specialist with IHS/HQ, Office of Resource Access and Partnerships (ORP) in Rockville, MD. Chairman Hernandez feels that by the time California documents get to headquarters funds are depleted. Chairman Hernandez would like CHEF claims to go directly to headquarters and Ms. Joseph agreed.

ACTION ITEM:

Dr. Sprenger will ask Mr. Old Elk if claims can go directly to him.

California Representatives to the National IHS Workgroup Reports:

Tribal Leaders Diabetes Committee (TLDC):

No report

Facilities Appropriation Advisory Board (FAAB):

Mr. Masten reported no activity. The October meeting was cancelled due to its being scheduled the first part of the Fiscal Year and the difficulty of obtaining prior year information.

Budget Formulation Workgroup (BFWG):

Ms. Joseph stated that Dr. Roubideaux wants a briefing before the budget is presented. Ms. Joseph commented that the government is under a Continuing Resolution (CR) until December 3. Currently there is a 1.3 trillion U.S. debt and in the next 8 years it could increase by 8 trillion dollars. As a result we may not see the increase expanded with the

IHCIA authority. Chairman Hernandez stated that even though it looks like a great increase, it's not much looking at the future. Everyone just needs to vote and ask for more funds. Chairman Devers stated we need to set aside a day time for formulation.

Behavioral Health Workgroup (BHWG):

Ms. Joseph stated this group should get a report on Meth and Domestic Violence funds. Maybe re-compete those that are not doing well.

Tribal Consultation Workgroup (TCW):

Chairman Hernandez reported October 13, was the last meeting in Denver. Dr. Roubideaux's announcements were positive.

Ms. Kerrigan stated that Health and Human Services, Secretary Kathleen Sebelius is accepting nominations for the Secretary's Tribal Advisory Committee: one representative for each twelve areas and five at large for the advisory committee. Chairman Devers commented that it will be hard for the tribes to agree on one representative.

Chairman Hernandez stated at the CHS tribal consultation they were thinking of lowering the threshold hold to \$19,000 to the budget commission. We need more funds in CHEF. There is a big fight over direct and indirect funds. There will be a 3-4 day IHS conference workshop with tribal leaders and Area Directors. There will be a Contract Health Service (CHS) panel. The meeting will be held in February or March 2011.

Ms. Kerrigan asked Chairman Hernandez to ask Dr. Roubideaux for an Ambulatory Surgical Care Study. Ms. Kerrigan believes California could justify two to three centers. A feasibility study needs to be completed. The Portland Area completed theirs and they would be a good comparison to California.

ACTION ITEM:

Chairman Hernandez asked Ms. Kerrigan to send him an e-mail on this request.

Uniform Definition of an Indian for use by the Centers for Medicaid and Medicare (CMS), Office of Consumer Information and Insurance Oversight (OCIO) and the Internal Revenue Service (IRS):

Mr. James Crouch, Executive Director, California Rural Indian Health Board (CRIHB) distributed a copy of CRIHB Resolution No. 276-10-10 and the definition of "Indian" under the Affordable Care Act approved by the Tribal Technical Advisory Group (TAAG).

Budget Formulation 2013:

Ms. Miller gave a presentation on the process that was followed to formulate the budget 2012 last year and the process expected for the 2013 budget. Budget formulation will be a major topic at the next CATAC meeting on January 4 and 5. Chairman Devers asked if H1N1 was still a hot issue, and Ms. Miller indicated that the group could make it one if they wish. Ms Kerrigan stated that this can be discussed at the next CATAC meeting and at the Tribal Leaders' Consultation Conference in March at the Picayune Rancheria in Coarsegold, CA.

Office of Environmental Health and Engineering (OEH&E):

Mr. Fluette had his IHS/CAO staff gave the CATAC presentations on the following divisions: Health Facilities Engineering; Environmental Health Services; and Sanitation Facilities Construction.

ACTION ITEM:

Chairman Hernandez asked for a breakdown of projects on the Sanitation Deficiencies Inventory (SDI).

Emerging Issues:

Dr. Sprenger announced that on December 21, the IHS, Department of the Interior's Bureau of Indian Affairs (DOI-BIA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) will conduct a Suicide Prevention Listening Session at the Federal Building, Cottage Conference Room, 2800 Cottage Way, Sacramento, CA. A notice will be sent out with an agenda.

Meeting Adjourned.

Additional Tribal and program leaders, Indian Health Service staff, and guests in attendance during the October 27, 2010 CATAC meeting:

Name

Representing

Chairperson Elizabeth Hansen

Redwood Valley

Mr. Jim Crouch

CRIHB

Mr. Lin Killam

RSBCIHI

IHS/CAO staff

Gary Ball, Architect

Susan Ducore, Area Nurse Consultant

Lisa Nakagawa, Injury Prevention Specialist

Karen Nichols, Contracting Officer

Luke Schulte, Area Environmental Engineer Consultant

Gordon Tsatoke, Director of Environmental Health Services

Richard Wermers, Director of Health Facilities Engineering

Steve Zerebecki, Public Information Consultant

IHS/CAO TRIBAL ADVISORY COMMITTEE MEETING

October 27, 2010

October 27, Location: Board Room, 2nd Floor

9:00 AM	Welcome		Ms. M. Kerrigan
	Review Executive Summary-June 29-30		Ms. M. Kerrigan
9:15 AM	Youth Regional Treatment Center North and South updates		Ms. M. Kerrigan
10:15 AM	Indian Health Care Improvement Act Review		Ms. M. Kerrigan
10:45 AM	California Representatives to National IHS Workgroup Reports		
	Diabetes Committee	TLDC	Ms. D. Chihuahua Ms. R. Nelson
	Facilities Approp. Budget Formulation	FAAB BFWG	Mr. P. Masten Ms. R. Joseph Mr. J. Hernandez
	Behavioral Health Tribal Consultation	BHWG TCW	Ms. R. Joseph Mr. A. Super Mr. J. Hernandez
	Contract Health Services	CHS	Mr. M. Malicay Mr. J. Hernandez
12:00 noon	Lunch		
1:30 PM	Continue Workgroup Reports		
3:00 PM	Budget Formulation Preview		Ms. B. Miller
3:30 PM	IHS/CAO OEH&E Presentation		OEH&E staff
4:30 PM	Emerging Issues		Ms. M. Kerrigan
5:00 PM	Adjourn		

