Centers for Medicaid and Medicare Services (CMS)

Tribal Technical Advisory Group Update
CMS established the Tribal Technical Advisory Group (TTAG) in 2004 to provide advice and input to CMS on policy and program issues impacting American Indians and Alaska Natives (AI/AN) served by CMS programs.

Although not a substitute for formal consultation with Tribal leaders, TTAG enhances the Government–to–Government relationship and improves increased understanding between CMS and Tribes.
TTAG is comprised of a representative from:

- each of the 12 IHS Areas; and

- the National Indian Health Board, the National Congress of American Indians, and the Tribal Self-Governance Advisory Group.

Representatives from the CA Area:

Mark LeBeau, PhD, MS

Inder Wadhwa, NVIH CEO
The American Recovery and Reinvestment Act of 2009 section 5006(e)(1), which became effective July 1, 2009, mandates that TTAG shall be maintained within CMS and added two new representative’s positions:

- a representative from a national urban Indian health organization; and

- a representative from the IHS.
Medicare, Medicaid, the Children’s Health Insurance Plan (CHIP), and Exchange Plans play an integral role in ensuring access to health services for American Indian and Alaska Native (AI/AN) people and provide critically important funding support for the Indian health system.

In fact, in many places across Indian Country, these CMS programs allow for Indian health system sites to address medical needs that previously went unmet as a result of underfunding of the Indian health system.

The role of these CMS programs in Indian Country go beyond advancing general program goals and meeting the needs of individual health care consumers.
As an operating division of the United States Department of Health and Human Services (HHS), CMS owes a Trust Responsibility to the Tribes, as that solemn duty runs from the entire federal government to all federally recognized Tribes.

For these reasons and others, CMS policy development must include robust, meaningful and consistent engagement with the Tribes and the TTAG to CMS.
Tribal Technical Advisory Group
American Indian and Alaska Native Strategic Plan 2020-2025
There are four overarching goals in this plan that apply to all CMS programs, including Medicare, Medicaid, CHIP, and Health Insurance Exchanges.

These are:

Goal 1: CMS TTAG will develop policy relevant to the Indian health system.

Goal 2: CMS TTAG will apply policy relevant to the Indian health system.

Goal 3: CMS TTAG will evaluate policy relevant to the Indian health system.

Goal 4: CMS TTAG will keep policy responsive
GOAL 1:

CMS TTAG will develop policy relevant to the Indian Health System

OBJECTIVE 1A –
CMS must fully engage with Tribes through regular, meaningful consultation and listening sessions

Task 1: CMS will provide funding for technical assistance and support for Tribal leaders and their representatives at Tribal Consultations and Listening Sessions.

Task 2: CMS will provide timely notice of activities and biannual reports of the outcomes of Tribal Consultations and Listening Sessions.

OBJECTIVE 1B –
CMS must fully engage with Tribes to expand and enhance review of CMS’ proposed policies

Task 1: CMS will collaborate and consult with TTAG and Tribes before the policy development process begins, where Tribes have requested to be involved or where such policies have Tribal implications.

Task 2: TTAG will continue to conduct timely monitoring, comprehensive review and final comments to CMS on regulations, guidance and other documents issued by CMS that have Tribal implications.

Task 3: CMS will support activity to catalogue information submitted by TTAG and affiliated Tribal organizations in response to its requests for comments; provide TTAG with a summary of TTAG and Tribal recommendations quarterly; clearly list CMS’ response to each of the TTAG’s recommendations; and note any action items that will be discussed at the TTAG meeting immediately following. Tracking will include letters from TTAG, white papers, data reports, and regulatory comments.

Task 4: CMS will support a process to provide a schedule to TTAG that outlines CMS’ timelines for conducting regulatory impact analysis on Indian Country for proposed policies that will notify TTAG of the opportunity to engage in the analysis, whether by providing documentation or by any other means.

Task 5: CMS will conduct periodic regulatory impact analysis of CMS’ proposed policies on Indian Country and share this information with TTAG as frequently as necessary to ensure TTAG has the most current and updated information.

OBJECTIVE 1C –
CMS must fully engage with Tribes to develop the capacity to collect data, in a manner that is informed by Tribal best practices

Task 1: CMS will support work to establish capacity to access and link data to Tribal citizens and other IHS eligible individuals across the IHS National Data Warehouse and CMS Medicare and Medicaid databases.

Task 2: CMS will support TTAG’s goals by promulgating policies for Tribal Access to CMS programs data.

Task 3: CMS will support and provide access for compilation and analysis of CMS program data in collaboration with Tribal data sources.

Task 4: CMS will support work to evaluate, use, and inform States on how the use of state plan amendments (SPA), 1115 waivers, or other demonstrations can improve access for Tribal citizens and other IHS-eligible individuals to timely health care services.

Task 5: CMS will work with TTAG, in collaboration with Tribes, to develop best practices for data collections.

Task 6: CMS will work with TTAG to identify gaps in data for policy development and plans for collection of data measures that address the social determinants of health.