

National Indian Health Board Update

California Area – Indian Health Service Meeting | March 7, 2024

Arch Super

NIHB California Area Representative

Presentation Overview

National Indian Health Board - Reintroduction

Legislative Updates

Other Updates



The National Indian Health Board



Established in 1972 by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and wellbeing for our People.



Who is the National Indian Health Board?

- Membership is comprised of 12 regional Tribal organizations, Health Boards and broader-issue regional organizations.
- 12 Board Members are chosen to represent the Tribes through the member organizations, in all 12 12 IHS Service Areas Designed to advocate for as the national health care a public health voice for federally recognized Tribes.





National Indian Health Board



Legislative Updates

Legislative Updates

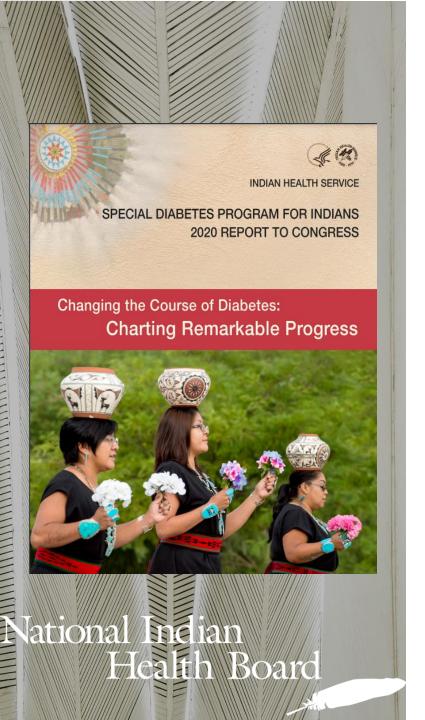
- ❖FY 2024 Funding
- Special Diabetes Program for Indians
- NIHB Legislative Initiatives



The Budget

- Congressional Leadership has announced a deal on 6 appropriations bills: Agriculture-FDA, Energy-Water, Military Construction-VA, Transportation-HUD, Interior-Environment, and Commerce-Justice-Science.
- Defense, Homeland Security, HHS-Labor-Education will continue in negotiations.
- Short-term Continuing Resolution (H.R. 7463) pushing deadlines to March 8 for the six negotiated bills, and to March 22 for the bills without agreement, which will keep non-IHS HHS programs going.
- The IHS is funded at \$6.96 billion flat funded with a \$3.6 million addition. Recissions of \$350 M and \$90 M.
- Health care programs, including CHC funding and PHSA Extenders are expected to ride the first set of appropriations packages on March 8.

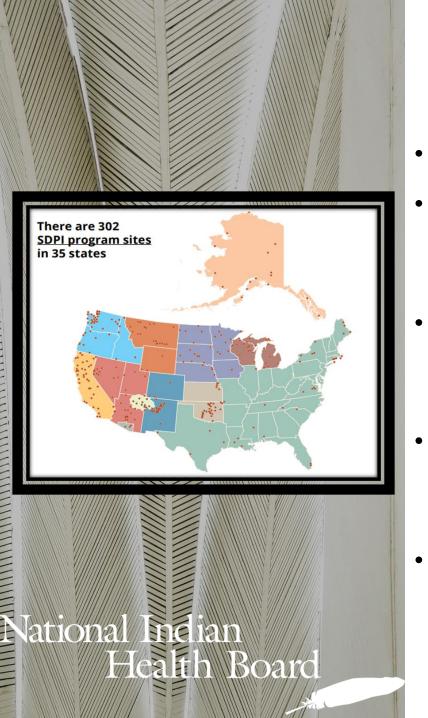




Special Diabetes Program for Indians

- The Special Diabetes Program for Indians (SDPI) expires March 8th.
 - Established in 1997 by Congress as a mandatory funding program to address type 2 diabetes in Indian Country.
- SDPI reauthorized in minibus through end of year, at \$160 million.
- Legislation has passed the House (H.R. 5378) and out of committee in the Senate (S. 1855) that would reauthorize SDPI for 2 years at a funding level of \$170 million per year.
 - Included in larger package that has run into trouble SDPI still popular!

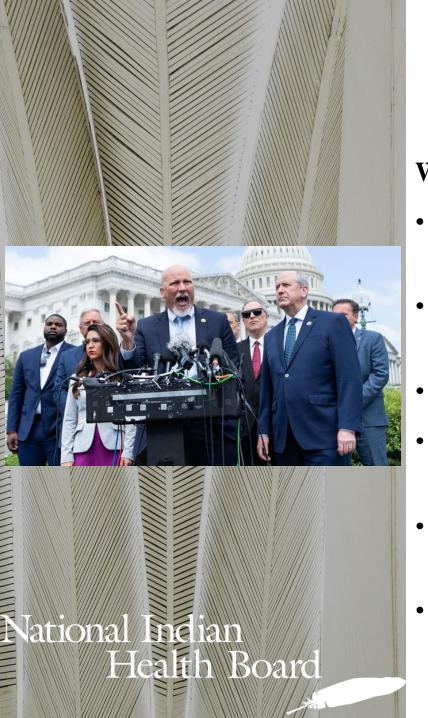




Special Diabetes Program for Indians

- NIHB led a letter to House and Senate Leadership.
- The Congressional Diabetes Caucuses led sign-on letters of support for SDPI Reauthorization. (Included 17 national and regional Tribal organizations)
- NIHB and TLDC members had a SDPI Hill Advocacy Day on September 20-21, 2023 for members of the Tribal Leaders Diabetes Committee.
- NIHB sent letter on February 27, 2024 urging Congress to reauthorize SDPI in the next budget vote, with message to end short-term extensions.
- <u>NEXT STEPS</u>: SDPI should move with other PHSA extenders and other health care expirations in final appropriations legislation. We will have the same conversation again in the fall.

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Special Diabetes Program for Indians

WHAT NEXT?

- Congress should see a minibus of the six agreed budget packages, including IHS, with goal to pass by March 8.
- Other HHS programs are extended to March 22 for additional negotiations.
- SDPI reauthorized in minibus until Dec 31, 2024 at \$160 M.
- SDPI, though a separate mandatory (and bipartisan) program, is still embroiled in this mess.
- Good news: SDPI renewal bills have been through "regular order" in both chambers.
- SDPI was not included in the most recent CR and would expire on March 8th if the minibus is not passed.

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Centers for Medicare & Medicaid Services Tribal Technical Advisory Group Legislative Priorities

- In July, the Centers for Medicare & Medicaid Services (CMS) Tribal Technical Advisory Group (TTAG) set up a work group to advance legislative priorities.
- TTAG workgroup drafted 8 legislative proposals to fix issues around Medicaid and Medicare to better serve AI/AN people.
- Currently, NIHB is working with the work group to engage in advocacy efforts with Congress to advance the legislation. We recently had a meeting with the Senate Finance Committee. We are going on a set of hill visits this week to continue building awareness and understanding of the priorities.
- NIHB and the TTAG are looking for Tribes and Tribal leaders to help with advocacy efforts in Congress. For more information, please email Garrett at glankford@nihb.org.

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Improving Data Access Legislation

- Senator Tina Smith (D-MN) is working on revising bipartisan legislation to improve how Tribes and Tribal Epidemiology Centers receive data and how data is reported.
- Similar legislation was passed by the House of Representatives in 2021 as a result of data challenges during the COVID-19 pandemic.
- NIHB is proposing revised language to ensure that Tribal data sovereignty is respected, but that Tribes and TECs are given access to data in a timely fashion.
- Includes requirements on HHS to follow the data policy developed in consultation with Tribes, and provide reasons for denial of data requests, based on a preestablished list of finite criteria.
- Met with Senator Smith's office on the legislation again this week as we continue to work on a bill introduction.

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PRC Improvement Act of 2024

- Senators Mike Rounds (R-S.D.) and Maria Cantwell (D-Wash.) introduced the PRC Improvement Act on February 12th. The bipartisan bill would amend Section 222 of the Indian Health Care Improvement Act (IHCIA) to prospectively clarify that under no circumstances should IHS beneficiaries be responsible for paying medical bills for PRC services that IHS authorized. The bill would:
 - Require IHS to develop procedures to reimburse beneficiaries for approved PRC services within 30 days if the patient paid out of pocket.
 - Allow a beneficiary to submit documentation to the agency as evidence when seeking reimbursement.
 - Strengthen liability provisions of the statute, making it clear that outside providers cannot collect wrongfully charged debt from beneficiaries with approved PRC claims.
 - NIHB has supported this type of legislation through resolution, and a fix for PRC debts could be important for diabetic patients who frequently need to see outside care.

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Other Legislative Efforts

- Special Behavioral Health Program for Indians Senator Smith's office is also working toward the reintroduction of legislation to authorize a Special Behavioral Health Program for Indians modeled on the success of SDPI. NIHB supports a bill reintroduction.
- Older Americans Act Reauthorization The older Americans Act is set to expire September 30, 2024 and works to reauthorize and amend the Older Americans Act are underway.
- Truth and Healing Commission on Indian Boarding School
 Policies Act Reps. Davids and Cole have introduced a House bill
 (H.R. 7227), similar to the Senate bill (S. 1723). This legislation
 would establish a Truth and Healing Commission to investigate,
 document, and report on the histories of Indian boarding schools,
 Indian boarding school policies, and long-term impacts on Native
 Communities.
- <u>Farm Bill Reauthorization</u> 2018 Farm Bill was extended through Sept. 30, 2024 to allow Congress additional time to craft a reauthorization package.

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Season 2 in 2024 – The Hope & Healing Podcast

Six Episode Series (Season 1):

- **1. Introduction** | Kristin Bitsuie
- 2. **Medicaid 101** | Angie Wilson
- **3. Medicare 101** | Adam Archuleta
- **4. Marketplace 101** | Yvonne Myers
- 5. Health Equity | Jim Roberts
- **6. Emerging Hot Topics** | Melissa Gower & Winn Davis









Tribal Town Hall on HHS Tribal Data Access Policy

- Background: HHS released a Dear Tribal Leader Letter that shares its draft Tribal Data Access Policy.
 - A virtual consultation took place on February 6, 2024. Comments were submitted by March 5, 2024.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES TRIBAL AND TRIBAL EPIDEMIOLOGY CENTER DATA ACCESS POLICY

PURPOSE AND SCOPE
OBJECTIVES
POLICY
DEFINITIONS
EFFECTIVE DATE

SECTION 1 PURPOSE AND SCOPE

Tribal sovereignty was recognized by the United States in the U.S. Constitution in 1787, establishing the political relationship that continues to exist between the federal government and each federally recognized Tribe (Tribe). This government-relationship has been given form and substance by numerous treaties, laws, federal judicial precedent, and Executive Orders. It reaffirms the right of Tribes to self-determination and self-governance over their members, territory, and resources.

Tribal sovereignty serves as the Tribal governments' basis to exercise authority over public health matters impacting their Tribal Members, as well as emerging threats and other health-related needs in their communities. Agencies and authorities of a Tribe responsible for public health matters as part of their official mandate, as well as those acting under a grant of authority from or contract with that public health agency, are public health authorities (PHAs) for purposes of the Privacy Rule promulgated under the Health. Insurance Portability and Accountability Act of 1996 (HIPAA). Tribal Epidemiology Centers (TECs) also serve to advance public health in Indian country, and they are treated as PHAs for purposes of HIPAA pursuant to the Indian Health Care Improvement Act (HiClA), 25 U.S.C. § 1621me. It is therefore critical that Tribes and TECs, acting in their capacities as PHAs, have timely access to appropriate data for their public health

The purpose of this Tribal and Tribal Epidemiology Center Data Access (TTDA) Policy is to establish a U.S. Department of Health and Human Services (HHS) wide policy for outlining the types of Data to be made available to Tribes and TECs, acting in their capacities as PHAs. It also serves to establish an HHS-wide expectation for responding to requests from Tribes and TECs acting in their capacities as PHAs for Data in the custody and control of HHS and its Staff and Operating Divisions (collective) referred to as "Divisions").

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2024 NIHB Legislative & Policy Agenda

- 1. NIHB's Legislative & Policy Agenda is the collective, national Tribal health and public health priorities for action in 2024.
- 2. Seeking feedback from all Tribes in all Areas on 2024 proposed Policy Priorities.
- 3. Authorizes the work of NIHB as we strive make systems change and gain funding for Tribal health and public health.
- 4. **COLLECTIVE Advocacy blueprint** for ensuring that all AI/AN people and communities can achieve the highest level of health and well-being.



2023 LEGISLATIVE AND POLICY AGENDA FOR INDIAN HEALTH

Priority Areas:

I.	Treaties, Trust, and the Government-to-Government Relationship
II.	Equitable and Comprehensive Funding
III.	Innovative and Sustainable Infrastructure.
IV.	Promote Health Equity in Indian Country
V.	Tribal Behavioral Health
VI.	Support Empowered & Culturally Informed Health Workforce
VII.	Increase Access to Quality Health Care
VIII	Strengthen Tribal Public Health Capacity and Infrastructure

Focus Areas In Review: 2023 Legislative & Policy Agenda

Tribal Sovereignty and the Governmentto-Government Relationship

Equitable and Comprehensive Funding

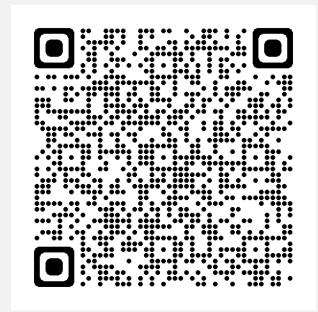
Innovative and Sustainable Infrastructure

Health Equity

Tribal Behavioral Health Emergency Preparedness and Response

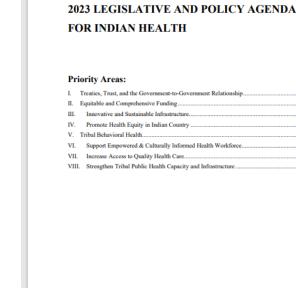
Empowered Health Care Workforce

Access to Quality Health Care Tribal Public Health Capacity and Infrastructure



2024 Legislative & Policy Agenda

- Seeking feedback from Areas on 2024 Policy Priorities.
- Direct feedback to <u>federalrelations@nihb.org</u> or use the form at the QR Code below.



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Tribal Advisory Committee (TAC) Highlights for California

TACs are advisory bodies of elected Tribal leaders from federally recognized Tribes. TACs provide advice, recommendations, and input on policy and programmatic issues impacting AI/AN populations.

NIHB provides support and policy expertise to TACs and their delegates or members, including drafting talking points for TAC meetings, note taking, and drafting follow-up letters to keep agencies accountable.

NIHB is actively recruiting Tribal leaders to serve on TACs, and below are the current vacancies we are looking to fill with Tribal leaders in California.

California Area TAC Vacancies:

- **Primary Rep:** National Institutes of Health, Indian Health Service National Tribal Advisory Committee on Behavioral Health, Veterans' Affairs Tribal Advisory Committee
- Alternate Rep: Centers for Disease Control and Prevention Tribal Advisory Committee, National Institutes of Health, Substance Abuse and Mental Health Services Administration Tribal Technical Advisory Committee, Indian Health Service National Tribal Advisory Committee on Behavioral Health

To request Technical Assistance or if you have any questions regarding TAC's, email Garrett:

glankford@nihb.org



Scan QR Code to visit NIHB's TAC Webpage

National Indian Health Board

IHS Full Funding Project



Goals:

To provide specific, community-driven, measurable, and Tribally rooted recommendations needed for meaningful innovation in the IHS.

Create an estimate for full funding for IHS.

Improve affordability and access to high-quality IHS-funded healthcare.



Advisory Group – 12 Subject Matter Experts

We have created an advisory group of subject matter experts from each of the IHS areas to collaborate with NIHB in the development of a full-funding estimate.

We are working on setting up the first meeting of the advisory group.

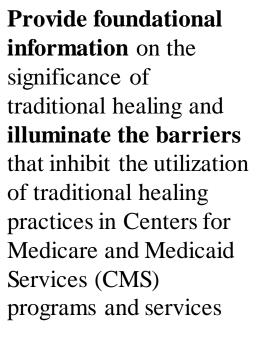




New Traditional Healing Work









Background

- ❖ Project is part of NIHB's year-long Cooperative Agreement with the CMS
 ❖ Project deliverables
- Project deliverables include an informational document to inform CMS staff on areas for improvement and foundational education



Collaboration

- Visits to sites using traditional healing
- **❖** Talk with Tribal health professionals
- ❖ Share Tribal citizens' stories with traditional healing
- Engage in future CRIHB
 Meetings that include traditional healing



Environmental Justice Project at NIHB

- Network of Technical Assistance Centers will provide TA to applicants for environmental health projects from 2024-2028
- NIHB can help Tribes find funding opportunities to apply for
- NIHB can also provide feedback on grant application:
 - Project Narrative
 - Budget Narrative
 - GIS Mapping
- GOAL: Remove barriers that Tribes face when applying for environmental health funding opportunities AND steer as much funding as possible to Tribes



ENERGY EFFICIENCY AND CONSERVATION BLOCK GRANT PROGRAM

Funding Opportunity for Tribes

What is the EECBG Program?

The EECBG program provides formula funding directly to Tribes to implement projects relating to energy efficiency, reducing fossil fuel emissions, and cutting overall energy use and costs. These funds can be used in many ways to meet the unique needs of your community.



Why Tribes should apply?



- EECBG Funding is noncompetitive! This means all federally recognized Tribes have already been allocated these funds from DOE.
- 2. No-Cost technical assistance (TA) is available to support the application process and execution of your project.
- 3. Alternative voucher option with a simplified application and administrative burden.

How do Tribes apply?

Step 1: Pre-Application

I. Make sure you are registered with SAM.gov

II. Register in FedConnect

III. Complete the Pre-Award Information Sheet

IV. Receive and email from the PAGE system inviting you to apply Step 2: Complete your application

Applications are due by April, 30 2024!

Contact NIHB at environmentalhealth@nihb.org for more information or to request TA!

Energy Efficiency & Conservation Block Grants

- Planning grant for Tribes to examine energy efficiency needs
- Non-competitive funding opportunity
- Each Tribe is allocated funding
- Only Tribes that apply will receive the funding

NIHB can help with applications!

Email EnvironmentalHealth@nihb.org





To learn more about the TEJTAC, visit www.nihb.org/environmental-health/tribal-tac.



Open Environmental Health Positions at NIHB

- Senior Manager—Oversees the technical assistance center for environmental health
- Environmental Health Coordinator
 - Provides technical assistance on grant applications
- Climate Health Coordinator
 - Works with Tribes on climate health projects
- Environmental Health Associate
 - Creates educational materials on EH

<u>Apply Here!!</u>



Tribal Data Sovereignty Project Updates



Jennell Clark, Division
Chief of Public Health
Nursing for the Salt River
Pima-Maricopa Indian
Community, delivering a
presentation on eCR at
the National Tribal Health
Conference.

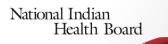
- The first two Tribal Nations in the country, in a pilot project in partnership with NIHB and the CDC have now onboarded to the Association for Public Health Laboratories (APHL) platform for receiving electronic case reports for reportable diseases.
- Connection to this platform enables Tribes and TECs to receive public health data in real time directly from healthcare providers.
- Tule River Indian Health Center in California is a current awardee of NIHB and is expected to be the third Tribal Nation to connect to this platform.
- The Great Plains Tribal Epidemiology Center is also the first TEC pursuing a connection in partnership with NIHB and CDC.

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Expected Summer 2024

- The final PHICCS II report is underway and will be released this summer.
- PHICCS is the <u>only</u> national report of Tribal public health capacity.
- PHICCS II will include data from 135 Tribal organizations.
- Learn more about PHICCS II, and review PHICCS I data HERE!





Healing Our Spirit Worldwide (HOSW)

HOSW is an international gathering of thousands of Indigenous leaders and health care professionals to share and celebrate the healing power of traditional Indigenous knowledge and cultures.

In September, NIHB Chairman William Smith and NIHB team attended the 9th Gathering of HOSW 2023 in Vancouver where both Chairman Smith and CEO Stacy Bohlen presented to over 3,000 attendees.

In 2026, NIHB will host the 10th Gathering of HOSW in Washington, D.C. If interested in learning more or joining us, please fill out **this form.**









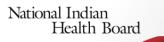
Let's do this together!

We need to raise \$3 million - Donate today!

Join the Planning Committee
Host Drums, Dancers,
Culture Craft Classes

Contact Jaime Hale jhale@nihb.org

2026 The United States Tribes Will Host Through NIHB Washington, DC





National Indian Health Board

2024 National Tribal Health Conference



May 20, 2024 - May 23, 2024 7:30 AM-4:30 PM



The Monument

444 N Mount Rushmore Road Rapid City, SD 57701







Conference Impact Circles of Knowledge

Mind, Body, Spirit: Health Promotion & Disease Prevention

Tribal Health
Equity on Our
Terms

Hope & Healing: Behavioral Health

Resilient Tribal Communities: Public Health Policy, Infrastructure, and Systems

Advocacy: Law, Policy, & Federal Relations

Strong Health Care Systems: Strengthening Health Care Delivery in Indian Country

NIHB IS HIRING



- Executive Assistant
- Staff Accountant
- Grants Coordinator
- Government Relations Admin Support Associate
- Policy Analyst
- Senior Recruiter
- Disease Surveillance Coordinator
- Public Health Policy & Programs Coordinators (Climate & Environmental Health / Quality Improvement)
- Thriving Communities Technical Assistance Center Senior Manager

More information at www.nihb.org or email jobs@nihb.org

