

Senate Bill 770 Health Services Cluster Meeting
Salem, OR
February 19, 2003

Attendance

Richard Acevedo	Department of Human Services (DHS)—Director’s Office
Rey Agullana	DHS—Health Services
Dana Ainam	Confederated Tribes of Grande Ronde
Russ Alger	Warm Springs Indian Health Services (IHS) Clinic
Paula Bauer	DHS—Children, Adults & Families
Brian Boltz	Confederated Tribes of Umatilla
William Burke	Confederated Tribes of Umatilla
Deborah Cateora	DHS—Health Services
Geneva Charley	Warm Springs Tribe
Rod Clarke	Klamath Tribal Health & Family Services
Janice Clements	Confederated Tribes of Warm Springs
Caroline Cruz	DHS—Health Services
Shulamit Decktor	NW Portland Area Indian Health Board
Bob Earnest	Department of Justice (DOJ)—Division of Child Support
David Foster	Oregon Housing & Community Services (OHCS)
Diana Foster	Coquille Indian Tribe
Ed Fox	NW Portland Area Indian Health Board
David Fullerton	Confederated Tribes of Grande Ronde
Kelly Hawk	Klamath Tribal Health & Family Services
Charlotte Honse	DHS—Children, Adults, & Families
Ron Hudson	Confederated Tribes of Grand Ronde
Fritz Jenkins	DHS—Finance & Policy Analysis
Jan Jensen	Region X
Margy Johnson	DHS—Finance & Policy Analysis
Vince Hill	DOJ—Division of Child Support
Cassie Katchia	Confederated Tribes of Grande Ronde
Ruth Kemmy	Department of Consumer & Business Services (DCBS)
Ernest H. Kimball	Center on Medicaid/Medicare Services (CMS)
Cheryle Kennedy	Confederated Tribes of Grand Ronde
Bruce Klein	Confederated Tribes of Umatilla
Sally Kosey	DOJ—Division of Child Support
Jack Lawson	Oregon Youth Authority
Chris Leno	Confederated Tribes of Grande Ronde
Greg Malkasian	DCBS—Director’s Office
Urbana Manion	Confederated Tribes of Warm Springs
Tina Maxwell	Coquille Indian Health Center

Nancy McCrary	Confederated Tribes of Siletz
Eric Metcalf	Coquille Indian Tribe
Sherry Milligan	Klamath Tribal Health
Debbie Mosher	DOJ—Division of Child Support
Stacy Mullens	DHS—Director’s Office
Judy Muschamp	Confederated Tribes of Siletz
Elwood Patawa	Confederated Tribes of Umatilla
Jim Pettyjohn	DHS—Health Services
Jim Quaid	Confederated Tribes of Warm Springs
Lynn Read	DHS—Health Services
Jim Roberts	NW Portland Area Indian Health Board
Linda Robertson	Coquille Indian Health Center
Melodie Rothwell	Region X
Barbara Sam	Burns Paiute Tribal Council
Victoria Santiago	Oregon Commission on Children & Families/Oregon Youth Authority
Carol Simila	Department of Consumer & Business Services
John Spence	Consultant, Oregon Criminal Justice Commission
Robert Staver	DHS—Children, Adults, & Families
Naomi Steenson	DHS—Seniors & People with Disabilities
Michael Stickler	DHS—Health Services
Lova Sturgill	Chemawa Indian Health Center
Twila Teeman	Burns Paiute Tribe
Richard Templeton	DHS—Health Services
Jean Thorne	DHS—Director’s Office
Leah Tom	Indian Health Services
Peggie Voth	Coquille Indian Tribe
Diann Weaver	Confederated Tribes of Coos, Lower Umpqua & Siuslaw Indians
Michael Watkins	Confederated Tribes of Grand Ronde

Introductions/Traditional Opening

Hudson led the traditional opening. Each attendee introduced him/herself.

DHS Budget Update (Thorne)

Effective January 1, Thorne became the director of DHS. Her career in state government began at DHS in 1976. The current challenges in human services and state government are the greatest she has ever seen. The state’s revenue is down by \$2 billion this biennium. The economic forecast continues to decline. In 2002, the legislature met for five special sessions in order to address budget concerns. Measure 28, a tax referendum, did not pass. In the last five

months of the current biennium, DHS must cut \$140 million (more than a 20 percent reduction) not including loss of federal matching dollars. Eighty percent of the DHS budget goes out in payments to counties, providers, etc. DHS has eliminated 410 positions and is freezing even more.

Thorne explained the criteria for how cuts were decided. For more information about this criteria, or to view the department's chronological list of reductions, refer to the DHS website at <http://www.dhs.state.or.us/aboutdhs/budget/2001-03budget.html>. Any cut is difficult; everyone DHS serves comes to the agency's programs because they are vulnerable in some way.

The legislature continues to look for one-time revenues to cover the deficit for this biennium. The Governor's Balanced Budget (GBB) does include all previously determined cuts, with one exception. The GBB does prevent some cuts to child welfare programs. The GBB also caps cost of living increases for many state employees and does not allow for utilization increases in medical equipment. To view the GBB, go to <http://www.bam.das.state.or.us/pub/GBB0305/>.

For direct interaction with the legislative committees that pertain to human service programs, contact the following offices:

- Senator Jackie Winters, Chair, Joint Committee on Ways and Means, Subcommittee on Human Resources
- Representative Ben Westlund, Chair, House Audit & Human Services Budget Reform
- Representative Jeff Kruse, Chair, House Health and Human Services
- Senator Bill Fisher, Chair, Senate Human Resources
- Senator Bill Morrisette, Chair, Senate Health Policy

With inevitable cuts on the horizon, Thorne is interested in looking at how the agency, tribes, advocates, and other partners can position themselves for re-growth once the opportunity arises. DHS needs to continue to be strategic.

Hudson and Metcalf expressed concern regarding DHS' willingness to advocate on behalf of tribes. Acevedo reminded the group that DHS is committed to a strong relationship with the tribes, as evidenced by this meeting. DHS cannot satisfy every need the tribes have; tribes should continue to interact directly with the legislature, too. Thorne agreed to discuss maintenance and improvement of government-to-government relationships with DHS Cabinet soon.

Regarding reorganization, DHS is seeking feedback from all of its advisory groups. Thorne asked Acevedo to ensure that attendees at the next quarterly meeting (May 21, 2003) discuss the following questions:

- 1.) What is working well with reorganization?
- 2.) What could work well, but needs some adjustment?

3.) What is not working well and needs to be stopped or drastically changed?

Clarke inquired about the possibility of DHS eliminating some federally reimbursed programs for tribes. Thorne explained that Read would address this issue later in the day.

Tribal Child Support (Kosey)

See various handouts. Kosey is eager to know what her office can do to help. She is available to work with specific tribes to inform, collaborate, and problem-solve. Hill works specifically with the Siletz Tribe. From his perspective, this arrangement has been very successful thus far. Acevedo explained that Kosey has provided exceptional advocacy in the recent past.

Tribal Updates

Burns Pauite Tribe (Teeman): The tribe is deciding how best to handle the budget crisis, specifically, how to assist those who are losing services. The search for a social service director continues.

Klamath Tribes (Clarke): The Department of Tribal Health, Family Services unit is downsizing; health expenditures have exceeded IHS budget for some time. The unit is working hard to identify further efficiencies. Major cuts to health benefits seem inevitable. From Clarke's perspective, DHS field staff are facing disproportionate and unnecessary cuts. Clarke has not been impressed with the process by which cuts to the DHS budget have occurred. He has been disappointed to learn that special consideration has not been made for federally reimbursable services to tribes. In the past four months, the tribes' drug and alcohol programs have lost approximately 60 percent of their funding. He suggests a tribal work group to discuss input to DHS on reorganization.

Confederated Tribes of Coos, Lower Umpqua, Siuslaw Indians (Weaver): She is attending this meeting for first time; no further update.

Coquille Indian Tribe (Metcalf): Construction to remodel existing space for the tribe's diabetes program is underway. The move to Oregon Health Plan (OHP) Standard is having a heavy impact. Metcalf has a strong preference for maintenance of federally reimbursed programs. He is hopeful that DHS and tribes can find creative ways to make this happen.

Confederated Tribes of Siletz (Muschamp): For the health department, responding to changes in OHP has been very time-consuming. Fortunately, the tribe recently received two grants from DOJ which total \$500,000. Funds will be used to staff alcohol prevention and mental health services for individuals and families involved in the juvenile justice system. With the financial support of IHS, the tribe is hosting training for beginning housekeeping at Chinook Winds

Casino March 3-6. No registration fee is involved; call (541) 444-9670 if interested.

(McCrary): The tribe's social service efforts include renewing their Temporary Aid to Needy Families (TANF) plan and 477 plan. She is involved in recruiting for one Indian Child Welfare Act (ICWA) position and reclassifying another.

Confederated Tribes of Grand Ronde (Hudson): There is a major need for field staff to be trained on active efforts. With respect to their recent grant from DOJ, the tribes have a short amount of time to spend a lot of money. They have a strong desire to be strategic with funds; Hudson thanked Spence and Cruz for their efforts. The Title IV-E agreement was finally signed; funds have not yet arrived. Hudson is curious and concerned about Targeted Case Management; he is looking forward to an update. **(Watkins):** He sees a shift from state and federal funding to tribal funding. Tribes need to come together to offer collective input.

(Kennedy): She offers her condolences to state employees as they face the grievous task of reducing services. She reminded the group that each tribe has the right and responsibility to act as its own sovereign entity. Needs differ among tribes; tribes should not be treated identically, but they should partner together to achieve common goals. Kennedy requested that Acevedo arrange interest-based negotiation for services offered to the Confederated Tribes of Grand Ronde. Kennedy believes that it is irresponsible for the state to decline funds that could be passed through to tribes without cost to the state (i.e.: federally reimbursable programs). Acevedo explained that DHS is committed to looking at every feasible option for getting funds out to communities. DHS will be honest and include explanations when those options are not available. Discussions regarding funds to tribes need to occur at several levels. This meeting is one level; other levels include the Legislative Assembly, the Governor's Office, and the Commission on Indian Services.

Warm Springs Tribe (Quaid): The tribe is reducing services and planning for what they will have left, with an emphasis on saving services directed toward children and families. Work on the Behavioral Residential Service (BRS) contract continues. Quaid foresees even further cuts to the state budget. He is concerned that existing contracts may be halted. He would like to see fewer restrictions on where dollars are spent. **(Alger):** He expressed a strong desire to maintain federally reimbursable programs.

Confederated Tribes Umatilla (Patawa): The tribe hired consultants to provide further direction on how to implement the Health Insurance Portability and Accountability Act (HIPAA). Recruitment for a new patient advocate will likely begin in March. A diabetes conference will occur March 13; a flier will be sent to tribes. **(Klein):** Four months ago, he was hired as the new director for the Department of Children and Family Services (formerly the Social Service Department). Tribal council has mandated that he brings in new funds; he has extensive experience in grant writing.

DHS Office of Medical Assistance Programs (OMAP) (Read & Cateora)

See two handouts. Read is honored to be invited to attend. Clarke appreciates the effort taken to produce handouts; he is disappointed that exceptions to health plan changes were not discussed with the tribes prior to the Legislative Emergency Board. Metcalf inquired about next steps toward achieving exceptional status. In the handout entitled “American Indian/Alaska Native Benefits Under the Oregon Health Plan,” DHS does commit to seeking an “OHP Operational Protocol change” regarding retroactive enrollment for tribes. Read confirmed that her office will pursue this option immediately.

In addition, Read suggested that tribes seek the assistance of a legislator, along with Cateora, to draft language for a bill allowing a categorical exception under new OHP regulations. Acevedo recommended that Karen Quigley of the Legislative Commission on Indian Services be involved in that discussion as well. Kennedy requested that DHS help with recommended language; she does not want to jeopardize other populations. Cateora will represent DHS in this capacity. Per Fox, NW Portland Area Indian Health Board can host and pay for this subcommittee’s first meeting. The following individuals plan to participate: Read, Cateora, Metcalf, Clarke, NW Portland Area Indian Health Board (representative not yet determined), Kennedy, and Johnston. The first meeting will occur in early March. Interested parties will convene after the meeting to arrange the committee’s schedule.

Cateora explained that DHS has had some difficulty in accurately classifying tribal members; some have been assessed co-pays and premiums. Technical resolution is underway. In the meantime, Cateora is working to establish one central contact person whom tribes would notify when a tribal member is not accurately exempted from co-pays or premiums. For now, continue to send this information directly to her. Cateora will provide an update at the next meeting. Beginning March 1, several programs will be discontinued for the OHP Standard population. Tribes will receive an explicit memo from Cateora concerning mental health and addiction services that will still be allowed but will be limited to assessment, medication management, and consultation. The memos will include definition of services and coding. In order to enhance accuracy in technical programming, Cateora asks that tribes send her their pharmacy and durable medical equipment (DME) provider numbers to her as soon as possible. Also, for more rapid turnaround in problem-solving situations, tribes should provide Cateora with e-mail and fax numbers for those who handle billing.

For the past four or five years, the federal government has been concerned about what states are receiving less than 100 percent in matching funds. Several years ago, the Office of Management and Budget (OMB) challenged Cateora on how she defined “the encounter.” The issue is being revisited; OMB is questioning all states regarding their definition of this term. In some cases, OMB is withholding money from states on the grounds that only IHS clinics (and no other facilities) qualify for this match. Most states are in the process of mobilizing political groups to actively oppose these potential changes. Information has been sent to Thorne and the Governor’s office; Cateora will continue to advocate for this group on this issue. Please feel

free to contact her with further questions. Metcalf asked if Fox might be able to help. Fox is concerned that CMS is not operating openly and honestly; he will keep tribes informed as he continues to meet with various advisory groups.

Clarke thanked Cateora for her prepared, thorough contribution to the meeting.

Region X (Jensen & Rothwell)

See handouts including contact information. Jensen brings good news. Federal funds are available to tribes who are currently operating child support enforcement programs. In about six months, it is likely that a new rule will allow start-up funding, too. Rothwell's team specializes in TANF, Native Employment Works, and childcare as they relate to tribes. She works closely with Staver. Steve Henigson currently serves as the Regional Administrator for Region X, Administration for Children and Families (ACF). He is also the national tribal lead for ACF programs. Tribes are welcome to contact him directly.

CMS (Kimball)

Kimball reports that there is a lot of internal misunderstanding within CMS. He appreciates receiving collective input from the tribes. He uses these meetings to document feedback and return to his office to initiate change. He would like to further institutionalize the consultation process regarding decisions which impact tribes. Kimball would also like to see a more direct relationship between tribes and federal agency directors or secretaries.

Reimbursement methods are very complicated. In order to better this situation, technical experts from tribes, the state, CMS, and IHS need to come together. In addition, Kimball believes that CMS needs to develop a process by which tribe-related issues and problems are systematically addressed. Other states and tribes have concerns similar to those expressed at this meeting. Kimball does not believe that there is a purposeful intent to eliminate federal responsibility or payment for tribal services. Instead, multiple interpretations within CMS have resulted in fragmentation. Kimball will continue to advocate for the idea that tribes need to be treated like any other provider group (complete with a technical advisory group). He encouraged the group to view him as an entry point to this massive agency.

Clarke inquired with Kimball about the possibility of tribes receiving a federal level categorical exception for drug and alcohol and mental health programs. Cateora offered to bring this issue forward to her Technical Advisory Group (TAG). Kimball welcomes position papers which can serve as documentation of this interest. See handout from Fox.

Fetal Alcohol Syndrome Training (Dodson & Cruz)

See handout for content, location, and contact information. Program is cost-free to tribes.

OHCS Update (Foster)

Foster is a policy strategist working for the director of OHCS. His agency has two main functions. First, it funds many affordable housing developments. Second, it provides emergency assistance related to food, energy, weatherization, etc. He was recently asked to intervene in a tense situation involving his agency and a tribe; he was honored to have that opportunity. While budget cuts result in great loss, they also present the opportunity to shape a new and improved system.

DCBS Update (Kemmy & Simila)

See handouts which include contact information. DCBS oversees the following divisions: Insurance Division, Division of Finance and Corporate Securities, Workers Compensation Division, Ombudsman for Injured Workers, and Building Codes Division. Each division exists to protect consumers and workers in Oregon. Simila, a consumer advocate for the Insurance Division, provided an introduction to the division and the services provided by its four sections. In the past, Simila has worked with tribes regarding the Senior Health Insurance Benefits Assistance (SHIBA) program.

Targeted Case Management (Jenkins)

See two handouts. DHS did receive verbal federal approval to move forward with the State Plan Amendment, with one stipulation. In order to gain formal approval, DHS must remove the clause which includes foster children involved in care, control, or custody of tribes. Jenkins has shared this information with State Medicaid Directors in Florida and Texas. Jenkins presented the following three options: 1) send the State Plan Amendment without the clause regarding foster children 2) send the State Plan Amendment with the clause, get denied, and work toward an appeal, or 3) wait; do not send any State Plan Amendment at this time. Quaid would prefer to wait for the federal government to make a firm, documented decision regarding foster children which would apply to the entire country (not just Oregon Tribes). Clarke would prefer to submit two separate State Plan Amendments—one without the clause regarding foster children and another which specifies foster children as the target population. McCrary agrees with Clarke. Hudson agrees with Quaid. Jenkins requests that all tribes share their preferences with him or Acevedo within one week of this meeting.

Cluster reports

Due to time constraints, this section of the agenda will be held for the following meeting.

In Closing

In the future, Metcalf would like for the DHS Director and/or Deputy Director to attend each entire meeting.

Next Meeting & Adjourn

The next meeting will be held May 21, 2003. The Confederated Tribes of Grand Ronde will host. Further details to follow.