

TRIBAL CONSULTATION MEETING REPORT

Monday, June 15, 2015 Phoenix, Arizona

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Introduction/Background

The Arizona Advisory Council of Indian Health Care (AACOIHC) was established in Fiscal Year 1990. The authorizing statutes that define the membership of the AACOIHC and its duties are:

- ARS 36-2902.01: ACOIHC membership, compensation, and
- ARS 36-2902.02: ACOIHC duties, respectively.

These statutes are listed in the Arizona Revised Statutes: Title 36- Public Health and Safety; Chapter 29-Arizona Health Care Cost Containment System Administration; Article 1- Arizona Health Care Cost Containment System (see Attachment C for Existing Statutes).

In June 2014, the AACOIHC formed a Statutes Committee with the purpose of generating amendments to the current statutes. The amendments were to assist the ACOIHC to be current with the Tribal pace of Indian Health Care and the changing health systems and environments. Through a series of meetings the Statutes Committee created a draft statute amendment document which was presented during a Tribal Consultation Meeting on June 15, 2015 (see Attachment A for Agenda) for input from participants.

This report reflects the discussion and recommendations during the Tribal Consultation Meeting. Seven Tribes in Arizona were in attendance at the meeting and other Indian Health Care Stakeholders (see Attachment B for List of Attendees).

Open Discussion and Recommendations

The draft amendments of the statutes (see Attachment D for Recommended Statute Amendments as of June 15, 2015) were presented to the participants and the following recommendation/comments were provided by participants:

- Add the Early Childhood Development and Health Board as a state agency representative to the AACOIHC.
- Introduce both Statutes at the same time because one speaks to AACOIHC membership and the other speaks to AACOIHC duties and funding is needed to carry out or break it up and do this in segments, do one part in this coming legislative session and do another the following year.
- Create an advocacy statement to be presented to the Inter Tribal Association of Arizona (ITAA).
- Educate the Navajo Nation about the AACOIHC and the duties as they are not a member of ITAA.
- Continue to educate Tribal Leaders of the AACOIHC and their duties.
- The tribal 12 % set aside may be a resource for funding for the AACOIHC in the future. A dollar amount should be attached to each funding request and there should be accountability for that.
- Representative Benally will review the amendment language and sit with legislative staff to obtain their input and she will report back to the ACOIHC.

There was no opposition to the proposed amendments as presented. There was overall support for amending the statutes.

Next Steps

The Arizona Legislative Session begins the second Monday of each year. It is the intent of the AACOIHC to introduce a bill in January 2016 to update the statute. There are many more steps and activities to take place before this date. Recommended activities/steps include:

- **Open Comment Period:** An open comment period will be available to provide written comments and recommendations to the revisions of the statute.
- Native American Legislative Caucus: Engage the Arizona Native American Legislative Caucus to advise us on how best to move forward on the revision of the ACOIHC Statutes. A final version of the statues should be available by October/November of this year.
- <u>Dear Tribal Leader Letter:</u> Draft a letter to the Arizona Tribes to educate them on the ACOIHC statutes and amendments.
- <u>Letter of Support:</u> Draft a letter of support to copy the health directors, social services directors, behavioral health directors and the 638 programs and send it by e-mail and by mail and attach the original statutes and amended the statute.

Conclusion

The AACOIHC received many beneficial comments and input regarding the amendments of the statutes and how to further engage and educate Tribal Leaders, Indian Health Care Stakeholders, and State Leadership. The feedback and input will be considered highly by the AACOIHC to be incorporated into the draft statutes amendments.

For questions or more information, please contact Kim Russell, Executive Director, at 602-374-2575 or by email at Kim.Russell@azahcccs.gov.



TRIBAL CONSULTATION MEETING

Monday, June 15, 2015
State Lab Conference Room
Arizona Department of Health Services
250 North 17th Avenue, Phoenix, AZ 85007
1:00 pm – 4:00 pm

AGENDA			
1:00 p.m.	Welcome and Opening Prayer Lori Joshweseoma, ACOIHC Vice-Chairperson Department of Health Services Director, Hopi Tribe		
1:05 p.m.	Introductions		
1:15 p.m.	Purpose of Tribal Consultation Alida Montiel, ACOIHC Chairperson Health Systems Director, ITCA		
1:30 p.m.	Overview of ACOIHC Kim Russell, Executive Director, ACOIHC		
2:00 p.m.	Break		
2:15 p.m.	Proposed Amendments Michael Allison, Native American Liaison, ADHS a. 36-2902.01 - membership and compensation b. 36-2902.02 - duties		
2:45 p.m.	Open Discussion and Recommendations Kim Russell, Executive Director, ACOIHC		
3:45 p.m.	Summary of Meeting and Next Steps Alida Montiel, ACOIHC Chairperson Health Systems Director, ITCA		
4:00 p.m.	Closing and Adjournment Alida Montiel, ACOIHC Chairperson, Health Systems Director, ITCA		

Attachment B: List of Meeting Attendees

NAME	TITLE	TRIBE / ORGANIZATION
Andrea Johnson Harper	Health Center Director	Yavapai Apache Nation
Dennis Day	Medical Director	Kaibab Paiute Tribe
Jessica Rudolpho	Division of Health Programs Director	White Mountain Apache Tribe
Lavern Dallas	Behavioral Health Services Director	Hopi Tribe
Lori Joshweseoma	Department of Health Services Director	Hopi Tribe
Raquel Aviles	Associate Director of Health	Pascua Yaqui Tribe
Renee Emerson	Legislative District Assistant	Navajo Nation
Sandra Irwin	Health Director	Hualapai Tribe
Candida Hunter	Senior Director of Tribal Affairs	First Things First
Jennifer Benally	Arizona State Representative	Legislative District 7
Kim Russell	Executive Director	Advisory Council on Indian Health Care
Lydia Enriquez	Administrative Assistant	Advisory Council on Indian Health Care
Mary Huyser	Tribal Liaison	Arizona Department of Economic Security
Michael Allison	Native American Liaison	Arizona Department of Health Services
Kimberly Yellow Robe	Tribal Liaison	Social Security Administration
Alida Montiel	Health Systems Director	Inter-Tribal Council of Arizona, Inc.
Maria Dadgar	Executive Director	Inter-Tribal Council of Arizona, Inc.
Merry Manson	Student Intern	Inter-Tribal Council of Arizona, Inc.

36-2902.01. Advisory council on Indian health care; membership; compensation; meetings

- A. The advisory council on Indian health care is established consisting of the following members:
 - 1. Twenty members appointed by the governor. Each Arizona Indian tribe may submit recommendations to the governor. There shall be no more than one representative from each Arizona Indian tribe. Each member shall represent an Arizona Indian tribe and shall be nominated by his tribal governing body. The governor shall make appointments from the following areas:
 - (a) Five tribal members who represent health care agencies. At least one of the appointees shall have experience in serving elderly clients or clients with physical disabilities.
 - (b) Five tribal members who represent social service agencies. At least one of the appointees shall have experience in serving elderly clients or clients with physical disabilities.
 - (c) Five tribal members who represent agencies serving the persons with developmental disabilities.
 - (d) Two tribal members who represent tribal organizations or metropolitan Indian centers.
 - (e) Three tribal members serving at large.
 - 2. One representative from the Arizona health care cost containment system appointed by the director.
 - 3. One representative from the department of health services appointed by the director of the department of health services.
 - 4. One representative from the department of economic security appointed by the director of the department of economic security.
- B. Federal representatives of the centers for medicare and medicaid services, the Indian health service, the bureau of Indian affairs, the United States department of veterans affairs and the executive office of management and budget shall be invited by the governor to serve as technical advisors to the council.
- C. Except as provided in subsection A, paragraphs 2, 3 and 4, no member of the council may be an employee of this state.
- D. Members of the council are not eligible to receive compensation, but members appointed pursuant to subsection A, paragraphs 1 and 2 are eligible for reimbursement of expenses pursuant to title 38, chapter 4, article 2.
- E. Members appointed pursuant to subsection A, paragraph 1 shall serve staggered two year terms. A tribal member who is absent without notice from three consecutive meetings vacates his membership. The governor shall appoint a new member within thirty days from the third unexcused absence. Vacancies occurring on the council shall be filled for the balance of the term.
- F. The council shall elect a chairman and vice-chairman from its membership. The chairman and vice-chairman shall be members of a federally recognized Arizona Indian tribe. The election shall be held the first Monday in October of each year. The term of office shall be one year. The council shall meet at least six times a year and may meet more often at the call of the chairman or vice-chairman. A majority of the council constitutes a quorum.
- G. A member serving pursuant to subsection B is not eligible to vote and is not a member for purposes of determining whether a quorum is present.
- H. Meetings are open to the public and minutes of each meeting are open for public inspection.

36-2902.02. Advisory council on Indian health care; duties

A. The advisory council on Indian health care shall:

- 1. Hire and employ a director who shall hire and employ staff, subject to legislative appropriation, for purposes relating to the functions of the advisory council. The staff shall provide technical assistance to tribal governments on tribal health care initiatives. The director, on behalf of the council, shall annually notify the director of the Arizona health care cost containment system administration of the amount of appropriation required by the council for the following fiscal year.
- 2. Develop a comprehensive health care delivery and financing system for American Indians, specific to each Arizona Indian tribe, with a focus on creating Indian health care demonstration projects pursuant to title XIX of the social security act. In performing this duty the advisory council shall:
 - (a) Develop a comprehensive health care delivery and financing system, specific to each Arizona Indian tribe that uses title XIX funds and builds on currently available private, state and federal funds.
 - (b) Develop new title XIX demonstration projects, specific to each Arizona Indian tribe, both on and off reservations in cooperation with this state and the federal government.
 - (c) Facilitate communications, planning and discussion among tribes, this state and federal agencies regarding operations, financing, policy and legislation relating to Indian health care.
 - (d) Recommend and advocate tribal, state and federal policy and legislation that supports the design and implementation of health care delivery and financing systems specific to each Arizona Indian tribe.
 - (e) Notwithstanding section 36-2903.01, subsection B, in conjunction with the administration, request a federal waiver from the United States department of health and human services that allows tribal governments that perform eligibility determinations for temporary assistance for needy families programs to perform the Medicaid eligibility determinations for persons who apply for services pursuant to section 36-2901, paragraph 6, subdivision (a). If the waiver is approved, the state shall provide the state matching monies for the administrative costs associated with the Medicaid eligibility based on federal guidelines. As part of the waiver, the administration shall recoup from a tribal government all federal fiscal sanctions that result from inaccurate eligibility determinations.
 - (f) Perform other duties as requested by the legislature.
- B. The director, on notification by the advisory council, shall include the amount of the appropriation request in the administration's annual appropriations request.

Attachment D: Recommended Statute Amendments as of June 15, 2015

ARS 36-2902.01- ARIZONA Advisory council on Indian health care; membership; compensation; meetings AND PURPOSE

A. THE ARIZONA ADVISORY COUNCIL ON INDIAN HEALTH CARE IS ESTABLISHED TO ALLOW TRIBAL GOVERNMENTS, TRIBAL ORGANIZATIONS, AND URBAN INDIAN HEALTH CARE ORGANIZATIONS IN THE STATE OF ARIZONA REPRESENTATION IN SHAPING MEDICAID AND HEALTH POLICIES AND LAWS THAT IMPACT THEIR SERVICE POPULATION.

- B A. The ARIZONA advisory council on Indian health care is consistSing of the following members: APPOINTED BY THE GOVERNOR WITH THE EXCEPTION OF THE STATE AGENCY REPRESENTATIVES:
 - 1. Twenty members appointed by the governor. Each OF THE TWENTY-TWO FEDERALLY RECOGNIZED AMERICAN INDIAN Arizona Indian tribe OF ARIZONA may submit recommendations to the governor TO REPRESENT THEIR TRIBE AND BE SEATED ON THE COUNCIL. There shall be no more than one representative from each Arizona Indian tribe. Each RECOMMENDATION member shall represent an Arizona Indian tribe and shall be SUBMITTED nominated by THE his tribal TRIBE'S CHAIRPERSON, GOVERNOR, OR PRESIDENT. governing body RECOMMENDATIONS MAY BE FORWARDED TO THE TRIBE'S HIGHEST ELECTED OFFICIAL FROM TRIBAL COUNCILS, TRIBAL HEALTH AND SOCIAL SERVICE COMMITTEES AND DEPARTMENTS/AGENCIES. RECOMMENDED MEMBERS MAY HAVE EXPERIENCE SERVING ELDERLY, YOUTH, CHILDREN, FAMILIES, AND PERSONS WITH DISABILITIES. The governor shall make appointments from the following areas:
 - (a) Five tribal members who represent health care agencies. At least one of the appointees shall have experience in serving elderly clients or clients with physical disabilities.
 - (b) Five tribal members who represent social service agencies. At least one of the appointees shall have experience in serving elderly or physically disabled clients.
 - (c) Five tribal members who represent agencies serving the persons with developmental disabilities.
 - (d) Two tribal members who represent tribal organizations or metropolitan Indian centers.
 - (e) Three tribal members serving at large.
 - 2. ONE REPRESENTATIVE FROM THE INTER TRIBAL COUNCIL OF ARIZONA, INC. TO BE RECOMMENDED BY IT'S EXECUTIVE DIRECTOR.
 - 3. ONE REPRESENTATIVE FROM AN ARIZONA URBAN INDIAN HEALTH ORGANIZATION THAT RECEIVES P.L. 94-437 TITLE V FUNDING TO BE RECOMMENDED BY CONFERRING WITH THE URBAN INDIAN HEALTH CARE ORGANIZATIONS IN THE STATE OF ARIZONA.
 - 5. THE GOVERNOR WILL OFFICIALLY APPOINT RECOMMENDED NOMINEES WITHIN 60 CALENDAR DAYS OF RECIEPT OF EACH RECOMMENDATION FROM A TRIBE, INTER TRIBAL COUNCIL OF ARIZONA, INC. AND URBAN INDIAN HEALTH ORGANIZATION.
 - 6. ONE REPRESENTATIVE FROM EACH OF THE FOLLOWING STATE AGENCIES: ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM, ARIZONA DEPARTMENT

OF HEALTH SERVICES, ARIZONA DEPARTMENT OF ECONOMIC SECURITY, AND ARIZONA DEPARTMENT OF CHILD SAFETY TO BE APPOINTED BY THEIR RESPECTIVE AGENCY DIRECTORS.

- 2. One representative from the Arizona health care cost containment system appointed by the director.
- 3. One representative from the department of health services appointed by the director.
- 4. One representative from the department of economic security appointed by the director.

 C. A MAJORITY OF THE COUNCIL SHALL BE MEMBERS OF FEDERALLY RECOGNIZED TRIBES OF ARIZONA.
- B. D. Federal representatives of the Ceenters for Mmedicare and Mmedicaid Services, the Indian Hhealth Service, the Bbureau of Indian Aaffairs, AND the Vveterans Aadministration and the executive office of management and budget shall be EX OFFICIO MEMBERS AND invited by the governor COUNCIL to serve as technical advisors to the council. EX OFFICIO MEMBERS SHALL SERVE A THREE YEAR TERM ON THE COUNCIL.
- C. E. Except as provided in subsection A, paragraphs 2, 3 and 4, no member of the council may be an employee of this state.
- D. F. Members of the council are not eligible to receive compensation, but members appointed pursuant to subsection A, paragraphs 1 and 2 are eligible for SHALL RECEIVE reimbursement FOR of TRAVEL expenses pursuant to title 38, chapter 4, article 2.
- E. G. Members appointed pursuant to subsection A, paragraph 1 shall serve staggered THREE two year terms. A APPOINTED tribal member who is absent without notice from three consecutive COUNCIL meetings vacates THEIR SEAT ON THE COUNCIL his membership. The governor shall appoint a new member within thirty days from the third unexcused absence. Vacancies occurring on the council shall be filled for the balance of the term.
- F. H. The council shall elect a chairman CHAIRPERSON, and vice-chairman CHAIRPERSON, AND SECRETARY from its NON-STATE AGENCY membership. The chairman CHAIRPERSON and vice-chairman CHAIRPERSON shall be members of a federally recognized Arizona Indian tribe OF ARIZONA. The election shall be held the first SECOND Monday in JULY October of each year. The term of office shall be one TWO years. The council shall meet at least six times a year and may meet more often at the call of the chairman chairperson or vice-chairman chairperson IN THE ABSENCE OF THE CHAIRPERSON. A majority of the SEATED council MEMBERS SHALL constitutes-a quorum.

 G. I. A member TECHNICAL ADVISOR serving pursuant to subsection C B is not eligible to vote and is not a member for purposes of determining whether a quorum is present.
- H. J. Meetings SHALL COMPLY WITH THE OPEN MEETING LAWS, are open to the public and minutes of each meeting are AVAILABLE open for public inspection.

- ARS 36-2902.02 ARIZONA Advisory council on Indian health care; duties
- A. The ARIZONA advisory council on Indian health care shall:
 - 1. Hire and employ a director who shall hire and employ staff, subject to legislative appropriation, for purposes relating to the functions of the ARIZONA advisory council. The staff shall provide ADVOCACY AND technical assistance to tribal governments on tribal health care initiatives AND BE A RESOURCE TO STATE GOVERNMENT. The director, on behalf of the council, shall annually notify the director of the Arizona Hhealth Ceare Ceost Ceontainment Ssystem administration of the amount of appropriation required by the council for the following fiscal year.
 - 2. ASSIST TRIBES AND URBAN INDIAN HEALTH ORGANIZATIONS TO Delevelop AN EFFECTIVE, EFFICIENT AND a comprehensive MEDICAL AND PUBLIC health care delivery and financing systemS for American Indians, specific to MEET THE NEEDS OF each TRIBE WITHIN ARIZONA Arizona Indian tribe, with a focus on creating Indian health care demonstration projects pursuant to title XIX of the social security act. In performing this duty the advisory council shall:
 - (a) Develop a comprehensive health care delivery and financing system, specific to each Arizona Indian tribe that uses title XIX funds and builds on currently available private, state and federal funds.
 - (A) (b) RECOMMEND Develop new title XIX AND XXI PROGRAMS, SERVICES, FUNDING, POLICIES, AND demonstration projects, specific to each Arizona Indian tribe AND URBAN INDIAN HEALTH ORGANIZATION, both on and off reservations in cooperation with this THE state OF ARIZONA and the federal government.
 - (B) (e) Facilitate communications, planning, ADVOCACY and discussion among tribes AND URBAN INDIAN HEALTH ORGANIZATIONS WITHIN ARIZONA, WITH this state and federal agencies regarding operations, financing, policy and legislation relating to Indian MEDICAL AND PUBLIC health care.
 - (C) (d) Recommend and advocate tribal, state and federal policy and legislation that supports the design and implementation of MEDICAL AND PUBLIC health care delivery and financing systems specific to each TRIBE AND URBAN INDIAN HEALTH ORGANIZATION WITHIN Arizona Indian tribe.
 - (D) CONDUCT AND COMMISSION STUDIES AND RESEARCH TO FURTHER THE PURPOSE OF THE COUNCIL AND ADDRESS IDENTIFIED INDIAN HEALTH CARE DISPARITIES IN ARIZONA.
 - (E) CONDUCT PERIODIC PUBLIC HEARINGS TO GATHER INPUT AND RECOMMENDATIONS FROM TRIBAL POPULATIONS ON THEIR HEALTH CARE ISSUES AND CONCERNS.
 - (F) APPLY FOR AND SEEK GRANTS, CONTRACTS, AND FUNDING TO FURTHER THE PURPOSE OF THE COUNCIL. SUCH FUNDING SHALL SUPPLEMENT AND NOT DEMINISH AHCCCS ANNUAL APPROPRIATIONS FOR THE COUNCIL.
 - (G) PROVIDE ADVOCACY AND TECHNICAL ASSISTANCE TO IMPLEMENT THE MANDATES AND PROVISIONS OF THE INDIAN HEALTH CARE IMPROVEMENT ACT AND TITLE XIX AND XXI, AND OTHER APPLICABLE PROVISIONS OF THE SOCIAL SECURITY ACT.

- (H) THE COUNCIL SHALL BE CONSULTED BY AHCCCS FOR INPUT AND RECOMMENDATIONS ON ANY POLICY OR LEGISLATIVE CHANGE PROPOSED TO THE CENTER FOR MEDICARE AND MEDICAID SERVICES PRIOR TO SUBMISSION OF SUCH CHANGE THAT IMPACT TRIBAL POPULATIONS.
- (I) (e) Notwithstanding section 36-2903.01, subsection B, in conjunction with the administration, AND A TRIBE THAT OPERATES A TEMPORARY ASSISTANCE FOR NEEDY FAMILIES PROGRAM request a federal waiver from the United States department of health and human services that allows tribal governments that perform eligibility determinations for temporary assistance for needy families programs to perform the Medicaid eligibility determinations for persons who apply for services pursuant to section 36-2901, paragraph 6, subdivision (a). If the waiver is approved, the state shall provide the state matching monies for the administrative costs associated with the Medicaid eligibility based on federal guidelines. As part of the waiver, the administration shall recoup from a tribal government all federal fiscal sanctions that result from inaccurate eligibility determinations.
- (J) (f) MAY Perform other duties as requested by the legislature WITHIN THE ADVISORY COUNCIL'S MISSION.
- B. The AHCCCS director, on notification by the advisory council, shall include the amount of the ADVISORY COUNCIL'S appropriation request in the GOVERNOR'S administration's annual appropriations request TO THE LEGISLATURE. THIS APPROPRIATION SHALL BE COMMENSURATE WITH THE ADMINISTRATIVE AND OPERATIONAL STAFFING NEEDS OF THE COUNCIL TO ADVOCATE FOR AND PROVIDE TECHNICAL ASSISTANCE TO TRIBES AND URBAN INDIAN HEALTH ORGANIZATIONS IN THE STATE OF ARIZONA.