



# 2017 TRIBAL SELF-GOVERNANCE ANNUAL CONSULTATION CONFERENCE

APRIL 23-27, 2017 | SPOKANE CONVENTION CENTER-SPOKANE, WA  
PROGRESSIVE PARTNERSHIPS: INVESTING IN TRIBAL NATION BUILDING

## Recorder Form

Onsite Contact Jackie Eagle 918-520-6334

Recorder: Sandra Sixkiller

Date: April 27, 2017

Session Title: Part 2 of 2 Tribal Caucus Roundtable Discussion to Develop a Strategy for the Indian Health System under Health Reform

Panelists:

Recorder and took part:

Melanie Fourkiller and Melissa Gower

Jim Roberta, Sr. Executive, Intergovernmental Affairs, Alaska Native Tribal Health Consortium

Doneg McDonough, President, Health System Analytics and Technical Advisory, TSGAC

Summary of Issues and Items Discussed:

Tribal Strategies

Questions from the Audience:

- Exemption from work requirements
- Comments from previous presentation. How deal with waiver and all coming from Washington State. How many took survey to State Waiver?
- Different state Medicaid benefit
- Engage with state agencies and hold regular tribal consultations
- Tribal dedicated staff to actively engage

Answer by Elliott Milhollin

Indian Special Terms and conditions for all state waiver

- Waivers Workgroup – template

Question

- Medicaid expansion priority
- Medicaid managed care issues for AI/AN's
- Scrap RPMS
- Regional solutions/collaborative
- Infrastructure for IHS to include planning
- Third party should not be an issue
- Cultivate continuous relationship with the State

- Split Medicaid payment in California
- Don't see in consultation, not a lot of information how it impact Indian Country and the impact.

Answer

- Need to education regional why protect Tribal rights.

Question

- Educational strategy for States benefits, specifically maximizing 100% FMAP opportunity.

Answer

- Challenges in very large States in getting their attention to Indian States. CMS suggest to consult. It is important to engage with State.

Question

- Federal trust responsibility language.
- Roadmap for MCO negotiation.
- Wisconsin Waiver: Tribal requesting an exemption on all of it; looking for support/consistent position from other Tribes.
- Ensure that our Health Board and Tribal Leadership has the information they need to adequately communicate/advocate with the state on these issues.
- Actual effects of National Changes (Budget, staffing services)
- Illustrate how it will affect healthcare resources/budgets, payer mix, CSC resources (because a decrease in direct funding will result in CSC funding decrease)
- Need information about how potential changes in health care will affect future health programming plans in Tribes

Answer Doneg McDonough

Legislative Strategy:

- Don't discount or forget an electoral strategy

Answer Elliot

- AHCA – all discussion to date have occurred on the House side; it is unclear how these conversations will go on the Senate side. Engage on the Senate side in anticipation of the health reform discussion emerging there.
- Some Tribes have been successful in exemptions from Management Care

Questions

- Active engagement in US. Congressional elected officials
- Federal budget outlook unknown creating greater uncertainty in funding
- Simplify communications on impact of revenue changes
- Good time to plan but consider positioning your programs for uncertainty ( building reserves being conservative about expansions)
- State plan amendments may be more important than waivers. Significant changes can be made with SPA amendments.
- Be aware of regulations in your State; they must publish these regulations and Tribes should weigh in with comments.
- Time for Tribal planning and building reserves

Answer XXXXXX

- Tribe Technical Advisor – get on CMS.org or IHS. Org
- Develop a communication dialog with your TTAG representative
- TTAG advises CMS on Medicare and Medicaid Policy
- TTAG has several subcommittees, TTAG members is on the committees, but calls are open for everyone to participant.
- Waiver subcommittee CMS tribal affairs group – take care of Indian issues.  
[Lane.terwilliger@cms.hhs.gov](mailto:Lane.terwilliger@cms.hhs.gov) – ask to be added to email group. Will get invite and can listen in and have input.
- National Indian Health Board (NIHB) [www.nihb.org](http://www.nihb.org)

Answer Elliot

Legislative Strategies

- Add IHCP to definition of providers at 1905(a)

Question

- Identify as mandate federal law, an alternative to 51s state to administer as an option.

Answer

- AN/AI are covered no matter where they are.
- Are all on list on chronic list.

Question

- Identify the Tribe specifically, not by State

Answer

- Indian Health provider type/scope of services. Could potentially include eligibility as well to avoid inconsistency and threats of roll back of Medicaid Expansion
- Go on [www.tribalsef@gov.org](mailto:www.tribalsef@gov.org) Under health to submit a question

Question

- Be active in your local community relationships
- Be active on state agency workgroups.
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Follow Materials, Documents, Websites for Reference: