OREGON HEALTH AUTHORITY

Office of Tribal Affairs

Overview of Oregon Health Authority Government to Government relationship

- Requirements for working with the Nine Tribes in Oregon to improve Healthy Tribal Communities
- OHA required Tribal Consultation for rulemaking
- Development of process to engage tribes when a tribal member is within state aid and assist or civil commitment process

Office of Tribal Affairs- where do we start?

OHA honors the government-to-government relationship with the Nine Federally Recognized Tribes in Oregon. It is Tribal Affairs responsibility to ensure that OHA is maintaining those relationships that guides the agencies work with Tribes, starting with these key elements:

- **Listen to the People** – Tribal Leaders, staff, individuals, elders, youth.
- **Follow Federal Laws** – Understanding the Federal Indian Trust Responsibility to provide Health Care to Indian People, honor tribal sovereignty and recognize the right of Indian tribes to self-determination and self-governance.
- **Uphold State Law** – Following the requirements of “Relationship of State Agencies with Indian Tribes” (SB770-2001) (ORS 182.162 to 182.168)
- **Implement the Agency Policy** – Ensure the processes of the OHA/ODHS Tribal Consultation and Urban Indian Health Program Confer Policy are being followed.
- **Utilize OHA Tribal Liaisons** – Supporting the dedicated agency staff that lead the work with the Nine Federally Recognized Tribes.

The People

Office of Tribal Affairs

Julie Johnson
OHA Tribal Affairs Director

Michael Stickler
Tribal Affairs Policy Analyst

Margarit Westfall
Tribal Affairs Director Executive Assistant

Tribal Liaisons

Medicaid Division
- Jason Stiener, Tribal Medicaid Senior Policy Analyst
- Laneya Smith, Tribal Medicaid Policy Analyst

Public Health Division
- Liz Hunt*, Acting Local and Tribal Public Health Manager
- Andrew Epstein*, Local and Tribal Public Health Policy Lead
- Jula Krewson, Public Health Tribal Liaison
- Carey Palm, ESF 8 Tribal Preparedness Liaison

Oregon State Hospital
- Kqalsanmayuk, OSH Native Services Coordinator

Behavioral Health Division
- Carisa Dwyer, Tribal Behavioral Health Specialist
- Angie Butler, Tribal BH Continuum of Care Advisor
- My'kee (Michael) Martinez, Tribal Alcohol, Tobacco and Other Drug Prevention Specialist

Equity & Inclusion Division
- Natalyn Begay, Tribal THW Analyst/E&I Liaison

Health Policy & Analytics Division
- Liz Stuart*, HPA Tribal Liaison
- Marina Cassandra*, Tribal Liaison – Oregon Health Insurance Marketplace

* Part time liaisons

Tribal Consultation

To establish and maintain a positive government-to-government relationship, communication and consultation must occur on an ***ongoing basis*** so that Tribes have an opportunity to provide ***meaningful*** and ***timely*** input on issues that may have a ***substantial direct effect*** on them.

In the beginning of the thought process of any change or update to programs, funding, requirements, etc. We need to ask ourselves how will this affect the tribes?

OHA/ODHS Tribal Consultation and Urban Indian Health Program Confer Policy

Possible Critical Events:

- Policy development
- Program activities
- A State Plan Amendment, demonstration proposal or renewal, waiver proposal or renewal, or state Medicaid regulations changes with a compliance cost or impact to Tribes.
- Results of monitoring, site visits, or audit findings
- Data collection and reporting activities
- Funding or budget developments
- Rulemaking impacting Tribes
- Any other event impacting Tribes

Process

When identifying the Critical Event what is the-

- Complexity, implications, time constraints, deadlines and issue(s).
- How will the Critical Event impact Tribes?
- Identify affected/potentially affected Tribes/UIHP

Performance Evaluation – Management System

❖If issue is identified as a Critical Event, draft Dear Tribal Leader Letter (DTLL) using template and send to Tribal Affairs (TA) within 7 calendar days of identifying.

❖TA will send DTLL within 14 days of an identified Critical Event

❖OHA shall report on the outcomes of the consultation within 30 days of final consultation via letter or email

Mobile Crisis Teams

We have worked with all NineTribes to develop MOUs with Community Mental Health Programs to collaborate with Mobile Crisis Teams.

Development of process to engage tribes when tribal member is within state aid and assist or civil commitment process

Oregon State Hospital Care Coordination Internal process for 9 Federally Recognized Tribes in Oregon: Intake staff send notification when a person identifies as a member of one of the Nine Federally Recognized Tribes in Oregon. All Nine Tribes have elected to participate, have provided a BH contact for OSH to connect with when they have an Aid and Assist or Civil Commitment person entering the system.

Oregon State Bar Legislative Proposal

OHA Office of Tribal Affairs would fully support this proposal; details would need to be figured out. This would honor the gov-to-gov relationship and supporting Tribal sovereignty and Self-governance. This has been the ongoing ask that Tribal Representatives have had since 2017 to remove the statutory barrier as it currently stands.

Create a good day!

Julie Johnson-Ft. McDermitt Paiute-Shoshone Tribes

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