

Meeting Minutes

Task Force on the Intersection of Tribal and State Forensic Behavioral Health

Date: August 5, 2026

Time: 1:00-4:00 p.m.

Location: Webex Webinar

Members in Attendance: Chair Judge Naomi Stacy, Vice Chair Judge Denise Keppinger, Lisa Nichols, Leslie Wu, Kimberly Lindsay, Judge Melissa Cribbins, Judge Ronald Yockim, Cindy Cecil

Members Not in Attendance: First Lady Aimee Kotek Wilson, Judge Karen Costello, Judge Gayleen Adams, Judge Patrick Melendy, Sharon Stanphill, Adrea Korthase

Quorum: No (7)

Welcome and Roll Call

- Judge Stacy welcomed everyone and did a roll call of members in attendance
- Non-task force members introduced themselves

Review and Adoption of Minutes

- Judge Stacy noted we will wait until we have a quorum to vote on ratifying the minutes from the June 25, 2026, meeting

Review and Discussion of Behavioral Health Systems

- Michael Johnson, Interim Manager of the Oregon Health Authority's (OHA's) Civil Commitment Unit, presented an overview of civil commitment in Oregon
 - Begins with a notice of mental illness (NMI), which initiates an investigation by an OHA certified investigator in the county where the NMI was filed
 - When a tribal member is identified and being investigated, the tribe is to be notified
 - Reviewed the four types of NMIs in Oregon (two-party petition, magistrate hold, hospital hold, non-hospital hold) and the differing timelines for investigation
 - Outlined the investigator's role
 - Determine if there's probable cause for a civil commitment hearing
 - Interview the person alleged to be mentally ill (PAMI)
 - Review patient records and interview relevant witnesses and file a report with their recommendation to the court
 - Make a recommendation as to whether there should be a hearing

- Recommendation of no hearing doesn't mean the person doesn't have a mental illness or symptoms of it, just that there was not probable cause
- If the person is willing and able to consent to voluntary treatment, a no hearing recommendation can be made, and the person can receive and accept treatment voluntarily
- If the investigator feels they have probable cause to recommend a hearing but thinks if the person received treatment it might mitigate the risk, they could offer diversion up to 14 calendar days
 - Initiated and filed by the investigator but requires buy-in from LIP
 - An attorney is assigned to the PAMI and they have 24 hours to obtain the PAMI's consent to diversion
 - Diversions can be extended for another 14 days
 - There could be a hearing at the end of diversion if the investigator feels probable cause is still there and/or the risk hasn't been mitigated
- The judge makes the determination at hearing
 - Dismissal and release
 - Civil committed up to 180 days
 - Conditional release is possible
 - Assisted out-patient treatment
 - Early release
 - CMHP will work with the person during commitment, usually looking towards placing them in the community once stabilized, generally on trial visits
 - Can be revoked if not meeting the conditions of the trial visit
 - If, by the end of the commitment period, a person is still dangerous they can be recommitted for another 180 days
 - Most hearings in Oregon result in a person either being released or committed to the hospital, but OHA is looking at why other options aren't utilized as much
- Questions?
 - Judge Yockim asked if OHA has had instances where a tribal medical provider has had a medical provider make a request for an investigation?

- M. Johnson replied he has not had direct experience with that, but reviewed data showing the numbers of NMIs written between 1/1/26-8/5/26 and of those how many had tribal affiliations, identified as Alaskan Native/American Indian, and/or were civilly committed
- Chair Judge Stacy asked, for those ordered to civil commitment, are there adequate facilities for them to access the type of treatment they need?
 - M. Johnson replied that placement remains a challenge, and people may be spending more time in an acute care setting at the hospital than may be necessary
- Chair Judge Stacy asked if there's any collective data gathered on the cross between folks who are in civil commitment and cross over into aid and assist issues?
 - Nichols replied that OHA is currently working on that data
- Butler asked M. Johnson where he got his numbers?
 - M. Johnson replied he got them through Health Policy Analytics and noted the CMHPs are responsible for completing Resilience Outcomes Analysis and Data Submission (ROADS) information on every investigation
- Butler asked M. Johnson to expand on the process of notifying tribes when a tribal member is being investigated
 - M. Johnson replied that tribal magistrates/judges can initiate the investigation process, with or without a warrant of detention
 - When a person is an enrolled tribal member in Oregon, the investigator shall solicit information from the tribe when feasible
 - What if a tribal member was on an NMI and didn't want the investigator to contact the tribe?
 - "The investigator shall solicit information from the tribe" is broad
 - What information can a tribe release to the investigator?
 - Judge Yockim noted the tribe would likely want to be in close coordination when a tribal member is involved
- Judge Yockim noted a reference in ORS 426.180(8) to an agreement with the governing body of a reservation. Does OHA currently have any of those agreements in place?
 - M. Johnson was not sure

- Judge Yockim noted the importance of having agreements in place to handle jurisdictional questions and questions about costs
- M. Johnson noted that, for tribal members under investigation or on diversion, it's ideal that the investigator doesn't work on the discharge plan or the follow-up care parts, depending on the CMHP
- Chair Judge Stacy asked if any of the tribal providers wanted to speak to the topics of coordination with the tribes, planning for discharge, etc.?
- Cecil replied that Community Care Solutions (CCS) has been good at reaching out when a tribal member presents to the emergency department or is under investigation, but it's hit or miss for the discharge and aftercare pieces
- Butler noted there isn't consistency across the state with the tribes
 - It would be helpful if there was a statute or rule to support that type of collaboration
- Ramseyer noted that Journeys...A Center for Your Soul is not involved in the discharge process, but would be interested in it
- Chair Judge Stacy asked if, when the coordination occurs, is it for those that live on the reservation or those that live off the reservation and have been subject to a state order?
- Cecil noted, as to the Confederated Tribes of the Umatilla Indian Reservation, it has been both
- Chair Judge Stacy noted a tribal member is someone enrolled in any federally recognized tribe, not just those in Oregon
- Judge Yockim noted he has spoken with the Cow Creek Band of Umpqua Tribe of Indians' behavioral health folks about the coordination with the local hospitals and how they commonly rely on physicians making the request for holds, and they, generally, feel comfortable with that process
- Butler noted it's important to think outside the box for tribal members that might be in other areas that get placed on a hold in another county
 - It's easy for tribal members to get shuffled around and lost in a big system and not have access to their family and their tribe
 - There are a lot of gaps in the system that need to be explored, and we need to develop intersections where tribes are able to be party to those cases, supportive of their tribal members, or involved in the process, regardless of where the member is located
 - Judge Yockim agreed and asked how a tribal member notifies that they are a tribal member and what happens if they're not in a condition to be able to say?

- Cecil noted that Purchase Referred Care (PRC), the funding source, is a big barrier to care around insurance coverage
 - This issue is a hurdle that needs to be looked into
- Nichols presented an overview of the aid and assist process in Oregon
 - Reviewed common terms in the aid-and-assist process and what being unable to aid and assist is and is not based on
 - Outlined the process
 - Criminal charges
 - Court questions fitness
 - Is the defendant able to participate in and understand the charges/the nature of the proceedings and participate in their own defense?
 - Could be brought up by a defense attorney, a judge, a person who works in the jail, etc.
 - Reviewed factors the court may consider in determining if the person is able to aid and assist in their own defense
 - If the motion is contested, it goes to hearing
 - If the motion is not contested, the judge may order the CMHP to complete a community consultation
 - HB 2005 allows the court to determine if someone is unable to aid and assist without doing a community consultation (can still do it but it's not required)
 - Judge determines whether they're able to aid and assist in their own defense, then we look at the criminal case resuming
 - Criminal case can be suspended if they are found unable
 - Do the parties agree?
 - If yes, the court can order restoration at OSH, in the community, or other avenues
 - If no, there's a hearing and that initiates a separate process
 - Community consultation is completed by CMHP staff who are qualified mental health professionals (QMHPs)
 - Informs the court of what services are appropriate and available in the community
 - Forensic evaluations are ordered by the court and are done by a Certified Forensic Evaluator who is a psychologist or psychiatrist
 - Provides the court with an opinion on whether the person is able to aid and assist in their own defense

- Can make a recommendation on hospital level of care
 - Provides information on treatment and services the person may need
- Competency restoration services can occur at OSH or in the community
 - Helps the person understand and become familiar with the process so they can engage in the proceedings and with their attorney
 - Some persons may need behavioral health, mental health, or legal services
- Community restoration services would include what's in competency restoration services
- Consultation and engagement between CMHPs and the tribes occur in the transition and wraparound planning stages
 - OHA wants to ensure that when CMHPs are planning for transition or continued engagement and support in the community that they are reaching out to tribes, consulting, trying to do collaboration on services, etc.
 - OHA designates their authority to the CMHPs to provide services for folks under civil commitment and aid and assist
- Funding Overview
 - General funds are the primary funding for civil and aid and assist programs
 - County Financial Assistance Agreements (CFAAs) with CMHPs to provide services to those who fall underneath these programs
 - OHA has contract administrators that are in collaboration and communication with OHA's partners
 - OHA has direct contracts with residential providers
 - Medicaid will fund treatment and residential services that fall within medical necessity
- Questions?
 - Chair Judge Stacy asked, for state general funds, are they able to bill back for that reimbursement on things that were medically necessary?
 - Example: someone is in a secure residential treatment facility but they're not assessed to be at that level
 - Nichols replied that we can't go back and bill Medicaid for that, it would be coming from the general fund

- Chair Judge Stacy asked, if the person was already on OHP, what happens when they enter this part of the process with the court orders?
 - Nichols replied that once they're out of jail or OSH, they can go back on OHP, so they can have Medicaid but not be eligible for reimbursement based on where they're placed
 - Chair Judge Stacy asked if that's an OHP policy?
 - Butler said it's a Medicaid determination

Overview of OHA Tribal Engagement Efforts

- Julie Johnson, Director of OHA's Office of Tribal Affairs, provided an overview of what their office does
 - Aim to listen to tribal leaders and governments, provide care to tribal members, utilize OHA tribal liaisons, and honor tribal sovereignty, self-determination, and self-governance while following federal laws
 - Follow the requirements of SB 770 (relationship of state agencies with tribes), which leads into the Office's consultation policy
 - Tribal consultation is required by federal and state law
 - On-going communication with tribes to gather input from them in a timely manner for things that directly impact them
 - Ensure the processes of the OHA/ODHS Tribal Consultation and Urban Indian Health Program Confer Policy are being followed
 - When rulemaking has a direct impact on tribes or doesn't include the tribes but should, that is when OHA would initiate tribal consultation, although the tribes may also initiate that at any point as well
- Angie Butler, Tribal Behavioral Health Continuum of Care Advisor, continued the overview of OHA's Office of Tribal Affairs
 - Mobile Crisis Team
 - Ensure tribal communities are engaged in processes
 - When a tribe wants to engage and participate in the mobile crisis team, they reach out via Butler and she connects them and helps develop an MOU
 - All 9 tribes have MOUs with their CMHPs
 - Process to engage tribes when a tribal member is within the state aid and assist or civil commitment process

- There's an internal process in OSH that when a person enters OSH on an aid and assist or civil commitment and they identify as American Indian or Alaskan Native and are a member of a federally recognized Oregon tribe, then the tribes are contacted for care coordination
 - All nine Oregon tribes elected to participate in this process
- OHA Office of Tribal Affairs would fully support the Oregon State Bar (OSB) Indian Law Section's full faith and credit proposal, but details would need to be figured out
- Questions
 - Newell asked at what point the behavioral health contact for OSH connects with the tribes when someone on aid and assist or civil commitment who identifies as American Indian or Alaskan Native enters the system?
 - Butler replied it's during the intake when they get to OSH
 - Newell noted that those doing community restoration on aid and assist wouldn't be able to utilize that process, same with those at a regional hospital
 - Butler recognized that there's a big gap in notification, since this process is only at OSH
 - Newell asked if there were ideas about how to expand the process so it's available for tribal members at any point in the system?
 - Butler believes it would take a legislative concept to push that because it would be a much bigger, more costly, system change

Review and Discussion on OSB Indian Law Section Proposal – Full Faith and Credit

- Coline Benson from OSB provided some information on OSB's legislative proposal process
- Chair Judge Stacy asked Matt Shields from OSB about the importance of the feedback the Task Force provides on the proposal
 - Shields noted that OSB is waiting to hear more information and what new discussions there have been on the topic and if there's a consensus on the proposal
- Chair Judge Stacy provided an overview of the substance of the proposal
 - Seeking to eliminate a legal barrier that tribal courts have faced rather than changing the mental health laws or those processes

- There's an Oregon statute that says the state and its entities give full faith and credit to orders, including tribal orders, and they do that but with a few exceptions
 - One such exception is the commitment to Indian country (includes the affidavit process)
 - Issue: that ends up going to state court which may or may not have a case pending before them and may or may not have a relationship with the tribal providers
 - The proposal seeks to remove that exception while still allowing tribal courts to choose to follow that state law process, and it would still be the tribal court order, and it would still be recognized at the state level
- Chair Judge Stacy asked if the Task Force would like to recommend including the proposal in the recommendations of the Task Force's final report?
 - If we have a quorum at the next meeting, we will vote on this
- Newell asked for an example of how the proposal would work on the aid and assist side?
 - Chair Judge Stacy noted that the idea is that once the tribal court gives their order that it could be handed off and they could expect to follow the state processes, but it would come back to the tribal court as the court of original jurisdiction as needed for court hearings
- Newell asked if the order was to transfer to the SRTF and there's admission there, how would that integrate into OHA's system and how would payment happen when it isn't initiated from a state system?
 - Nichols said she would need to think more about this
 - Butler provided some examples of when tribes and counties have collaborated on a person's transition out of SRTFs (it's a new process OHA is working on)
 - Chair Judge Stacy noted that tribal members live both on and off reservations, but these existing coordination efforts on release are under state court matters
- Newell asked to hear Chair Judge Stacy's perspective on what the proposal envisions for if a person from a community on tribal lands, or being held in a local jail on tribal court charges, is moved to the civil commitment system and how the state can work with hospitals to make sure they understand their obligations
 - This is still an open question
- Newell asked if, when there's a tribal court order sent and it's disregarded, is there a remedy the court can take?

- Chair Judge Stacy noted that's more a question for legislators, legal counsel, in regards to state entities etc.
- Chair Judge Stacy asked if there were any other statutory pieces to think about?
 - Butler noted there have been challenges paying for fee for service treatment in residential service facilities

Discussion on Ways to Involve Persons with Lived Experiences

- Chair Judge Stacy asked if there was anyone that had lived experiences to share
 - There was no one today
- If you know anyone who wants to share, they can share with the Task Force, even if they're not here right now, and we can still put it in the report in relation to our recommendations

Public Comment

- None

Homework and Next Steps

- It's not just a question of should a tribal court order be recognized in aid and assist and civil commitment, but also what the state does to recognize that order as well
 - Washington has done some work on this, and Chair Judge Stacy has reached out to a contact who can speak to that
 - New Mexico has some forms and statutes
 - The Task Force is looking at contacting them since they have a number of tribal jurisdictions
 - Colorado recently passed relevant legislation
 - Minnesota has long dealt with a number of issues around this
 - Nebraska allegedly turns over matters to the tribes and asks for their recommendations
 - Please let the Task Force know if there is a contact we can talk to for the above mentioned states or if there are other states we should look at
- Do the Task Force's state partners know anyone that the Task Force should talk to that would be helpful too?
- Newell asked members to come to the next Task Force meeting prepared to say whether they are supportive of a recommendation that the Indian Law Section's proposal be included in the Task Force's final report
 - OJD members won't be voting but can talk about it and take it to OJD's Behavioral Health Advisory Committee and talk to the Chief Justice about it and report back to the Task Force

- Other agencies should bring it to their leadership and discuss the proposal as well
- Butler asked if, based on what we hear from other state models, would we be able to change the OSB legislative proposal?
 - Chair Judge Stacy thinks the group working on the proposal would be open to changes consistent with the purposes of that amendment

Adjourn