

**RESOLUTION # 11-04-04
NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD**



**RESOLUTION # 288-07-11
CALIFORNIA RURAL INDIAN
HEALTH BOARD**

JOINT RESOLUTION

Support for the use of Data Sharing

- WHEREAS,** the Northwest Portland Area Indian Health Board (NPAIHB) is a tribal organization under P.L. 93-638 that represents 43 Federally-recognized Indian tribes in Oregon, Washington and Idaho and is dedicated to assisting and promoting the health needs and concerns of Indian people in the Northwest; **AND**
- WHEREAS,** the California Rural Indian Health Board, Inc. (CRIHB), founded in 1969 for the purpose of bringing back health services to Indians of California; is a tribal organization in accordance with Public Law 93-638, is a statewide tribal health organization representing 31 Federally recognized tribes in 21 counties through its membership of 12 Indian Health Programs throughout California's Indian Country; **AND**
- WHEREAS,** the NPAIHB and CRIHB are dedicated to assisting and promoting the health needs and concerns of Indian people; **AND**
- WHEREAS,** the primary goal of the NPAIHB and CRIHB is to improve the health and quality of life of its member tribes; **AND**
- WHEREAS,** the Indian Health Care Improvement Act as reauthorized in PL 111-148 the Affordable Care Act does establish that each of the twelve IHS Areas should have a IHS Epidemiology Center and that the administration of these services should be by Tribes, Tribal Organizations of Consortiums of Tribes; **AND**
- WHEREAS,** the purposes of these Epidemiology Centers is; to collect data and document progress towards meeting health status objectives, evaluate existing delivery systems, data systems, and other systems that impact the improvement of Indian health, assist Indian tribes, tribal organizations, and urban Indian organizations in identifying highest-priority health status objectives and the services needed to achieve those objectives, based on epidemiological data; make recommendations for the targeting of services needed by the populations served; make recommendations to improve health care delivery systems for Indians and urban Indians; provide requested technical assistance to Indian tribes, tribal organizations, and urban Indian organizations in the development of local health service priorities and incidence and prevalence rates of disease and other illness in the community; and provide disease surveillance and assist Indian tribes, tribal organizations, and urban Indian communities to promote public health; **AND**

WHEREAS, in the past the IHS has refused to provide IHS collected Data to IHS funded Epidemiology Centers in a timely and appropriate manner; **AND**

WHEREAS, Congress did respond to this problem by authoring new language within the Indian Health Care Improvement Act which require that; in general; an epidemiology center operated by a grantee pursuant to a grant awarded shall be treated as a public health authority (as defined in section 164.501 of title 45, Code of Federal Regulations (or a successor regulation) for purposes of the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191; 110 Stat. 1936); **AND**

WHEREAS, the new law requires that each Epidemiology Center shall have access to use of the data, data sets, monitoring systems, delivery systems, and other protected health information in the possession of the Secretary; **AND**

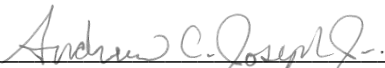
WHEREAS, to meet the objectives of the Epidemiology Center program in IHS administrative Areas such as California and Portland requires the conducting of matching studies which by definition require the use of personal identifiers and other protected health information, the use of which is governed by existing federal law.

THEREFORE BE IT RESOLVED, that the IHS should immediately establish a routine process in conformance with the Health Information Protection and Portability Act and the Privacy Act that fully implements the intent of Congress to provide data to Epidemiology Centers, without additional restrictions, which does allow for onsite possession and use, of protected health information and personnel identifiers sufficient to carry out matching studies with data housed outside of the IHS Wide Area Network and the IHS National Data Center.

CERTIFICATION

The foregoing joint resolution was adopted at a duly called regular joint meeting of the Board of Directors of Northwest Portland Area Indian Health Board and California Rural Indian Health Board (**NPAIHB** vote 25 For and 0 Against and 0 Abstain; **CRIHB** vote 20 For and 0 Against and 0 Abstain) held this 21st day of July 2011 in Lincoln, CA, and shall remain in full force and effect until rescinded.

**NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD**
527 SW Hall, Suite 300
Portland, OR 97201
(503) 228-4185

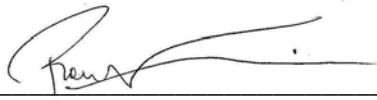


Chairperson of the Board

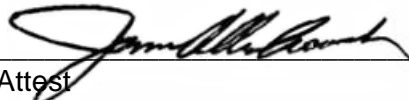


Attest

**CALIFORNIA RURAL
INDIAN HEALTH BOARD**
4400 Auburn Blvd, 2nd Floor
Sacramento, CA 95841
(916) 929-9761



Chairperson of the Board



Attest