

RESOLUTION # 11-04-06 NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



RESOLUTION # 290-07-11 CALIFORNIA RURAL INDIAN HEALTH BOARD

JOINT RESOLUTION

In Support of ARRA Exemption

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 Social Security Act provides states with the opportunity to impose enrollment fees, premiums, cost sharing and similar charges under certain conditions on Medicaid participants, and over time states have increasingly resorted to this opportunity as a means of controlling health service utilization and as a means of shifting costs to Medicaid participants; AND

WHEREAS, Section 5006 (a) of the American Recovery and Reinvestment (Act PL 111-5) amends sections 1916 and 1916(a) of the Social Security Act to preclude States from imposing Medicaid premiums, payment of a deductible, coinsurance or any other charge for any item or service covered by Medicaid provided directly or through referral from an Indian Health Service provider, including IHS directly operated facilities, tribally operated health programs or Urban Indian Clinics; AND

WHEREAS, this exemption further requires that the state Medicaid program not reduce payments to the provider that might otherwise occur as a result of this exemption; **AND**

WHEREAS. this exemption has been the law of the land since July 1, 2009 and states were formally and specifically noticed of the need to implement these changes on January 22, 2010 through a Dear State Medicaid Director letter; AND

of this date the states of California, Oregon, Washington and Idaho have failed to WHEREAS. fully implement this unique exemption as evidenced by the absence of an American Indian identifier in their provider eligibility look up systems or to implement a systematic process for compensating providers for the loss of income from the implementation of this exemption; AND

WHEREAS. the definition of Indian for whom this exemption shall apply is based on the definition of Indian found at U.S.C. section 1679, which includes all California Indians who are descendents of tribes that existed within the state in 1852 and members of Federally recognized Tribes.

THEREFORE BE IT RESOLVED, that the NPAIHB and the CRIHB request that the Centers for Medicare and Medicaid Services (CMS) survey all thirty five states that include reservation lands to measure the extent of compliance with section 5006 (a) of PL 111-5 exempting American Indians and Alaska Natives from cost sharing and the extent to which these new requirements are evidenced in the enrollment processes, the provision of services, the furnishing of goods, the payment of providers and data systems of each state.

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

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