



**NORTHWEST
PORTLAND
AREA
INDIAN
HEALTH
BOARD**

Burns-Paiute Tribe
Chehalis Tribe
Coeur d' Alene Tribe
Colville Tribe
Coos, Suislaw &
Lower Umpqua Tribe
Coquille Tribe
Cow Creek Tribe
Cowlitz Tribe
Grand Ronde Tribe
Hoh Tribe
Jamestown S' Klallam Tribe
Kalispel Tribe
Klamath Tribe
Kootenai Tribe
Lower Elwha Tribe
Lummi Tribe
Makah Tribe
Muckleshoot Tribe
Nez Perce Tribe
Nisqually Tribe
Nooksack Tribe
NW Band of Shoshone Tribe
Port Gamble S' Klallam Tribe
Puyallup Tribe
Quileute Tribe
Quinault Tribe
Samish Indian Nation
Sauk-Suiattle Tribe
Shoalwater Bay Tribe
Shoshone-Bannock Tribe
Siletz Tribe
Skokomish Tribe
Snoqualmie Tribe
Spokane Tribe
Squaxin Island Tribe
Stillaguamish Tribe
Suquamish Tribe
Swinomish Tribe
Tulalip Tribe
Umatilla Tribe
Upper Skagit Tribe
Warm Springs Tribe
Yakama Nation

2121 SW Broadway Drive
Suite 300
Portland, OR 97201
(503) 228-4185
(503) 228-8182 FAX
www.NPAIHB.org

Resolution #12-03-03

**"Support for NPAIHB EpiCenter Access to the Indian Health Service
Portland Area-wide RPMS Database"**

WHEREAS, the Northwest Portland Area Indian Health Board (hereinafter "NPAIHB" or the "Board") was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

WHEREAS, the NPAIHB is a "tribal organization" as defined by the Indian Self-Determination and Education Assistance Act (P.L. 93-638 seq. et al) that represents forty-three federally recognized tribes in the states of Idaho, Oregon, and Washington; and

WHEREAS, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USCS § 450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

WHEREAS, the NPAIHB is dedicated to assisting and promoting the health needs and concerns of Indian people; and

WHEREAS, the primary goal of the NPAIHB is to improve the health and quality of life of its member Tribes; and

WHEREAS, in furtherance of this goal in 1997, NPAIHB established the Northwest Tribal Epidemiology Center (*EpiCenter*) in an effort to improve the quality of American Indian and Alaska Native (AI/AN) epidemiology data; and

WHEREAS, the EpiCenter receives a grant from the Indian Health Service (IHS) to perform the Agency's statutorily required function to establish an epidemiology center in each IHS Area (see 25 U.S.C. §1621m) and in order for the EpiCenter to comply with both the statutory and grant requirements for epidemiology centers, the EpiCenter must collect data relating to the health status objectives described in 25 U.S.C. § 1602(b) to be able to carry out this role, the EpiCenter must have access to the IHS data included in the Resource and Patient Management System (RPMS).

WHEREAS, all forty-three Portland Area tribes have organized the Board as a "tribal organization" under the ISDEAA to carry out certain functions in the provision of their health care services and programs, which includes acting as a grant recipient, through the EpiCenter, to carry out the responsibilities of a tribal epidemiology center with the IHS; and

WHEREAS, the HHS Secretary is also mandated "to develop sets ... of data for uniformly defining health status for purposes of meeting the objectives specified in section 1602(b)" [see 25 U.S.C. § 1621m(a)(3)(A)], for which such data are required to carry-out the essential role as a tribal epidemiology center and when performing the functions of the Secretary and IHS as mandated under the Indian Health Care Improvement Act (IHCA); and

WHEREAS, the Patient Protection and Affordable Care Act (Pub. Law 111-148; or ACA) amends the IHCIA at section 214(e), a provision that deems epidemiology centers "public health agency" status (as defined at 45 CFR §164.501) under HIPAA in order to facilitate acquisition of data and requires the HHS Secretary, acting through the IHS Director, to grant epidemiology centers access to data and protected health information in the possession of the Secretary; and

WHEREAS, The *EpiCenter* has gained national recognition for developing and implementing many useful and innovative projects to improve the health and quality of life of Northwest tribes and has served as a national model for other Indian Health Service (IHS) areas to emulate in establishing their *EpiCenter* programs; and

WHEREAS, previous research by the NPAIHB *EpiCenter* has shown that public health data for Northwest AI/ANs are under-reported due primarily to misclassification of race in public health registries and vital health records. The correct identification of AI/ANs in surveillance and health claims data systems is essential for understanding the burden and distribution of disease, mortality, and health care utilization for public health planning; and

WHEREAS, the Northwest Tribal Registry (NTR) has, with Board approval, performed record linkage studies to identify and correct racial misclassification in various public health registries to better assess burden of disease for Northwest AI/ANs; and

WHEREAS, to have the capability to perform ongoing projects that improve the quality and accessibility of health data for Northwest tribes, for example record linkages with cancer registries, vital statistics, hospital and ED data systems, trauma registries, and STD/HIV registries, the NPAIHB *EpiCenter* needs to have ongoing access to the IHS Area wide RPMS database; and

WHEREAS, the NPAIHB *EpiCenter* has consistently demonstrated adequate measures to insure the physical security of data and has policies in place to control access to and release of data; and


WHEREAS, any dissemination of results to outside audiences will only be done in collaboration with and by approval of NPAIHB, the *EpiCenter*, and the PAIHS IRB.

THEREFORE BE IT RESOLVED, that the NPAIHB recommends that the Portland Area Office of the Indian Health Service provide on a recurring basis to the NPAIHB *EpiCenter* the RPMS Area wide database, including but not limited to the following data elements: full name, date of birth, sex, race, social security number, tribe, Indian blood quantum, classification/beneficiary code, primary facility, current community, full address, date of last update, date of death, and Medicaid/Medicare ID numbers.

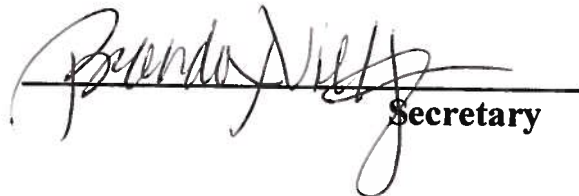
CERTIFICATION

NO. 12-03-03

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 30 for 0 against 0 abstain on April 19, 2011.


Chairman

Date


Secretary