Hello,

Please share this **funding opportunity** among your colleagues and community response teams. Applicants can submit a single application and **select from any or all of the nine competitive grant programs** referred to as "purpose areas." This approach allows the Department's grant-making components to consider the totality of a tribal nation's overall public safety needs.

While all 9 purpose areas are important, the highlighted ones are specific to forensic health care... but don't let that influence your needs ©!

The nine purpose areas are:

- Public Safety and Community Policing
- Comprehensive Tribal Justice Systems Strategic Planning
- Justice Systems and Alcohol and Substance Abuse
- Tribal Justice System Infrastructure Program
- Violence Against Women Tribal Governments Program
- Children's Justice Act Partnerships for Indian Communities
- Comprehensive Tribal Victim Assistance Program
- Juvenile Justice Wellness Courts
- Tribal Youth Program



You are subscribed to <u>Justice News</u> for the U.S. Department of Justice. This information has recently been updated with the following:

<u>Justice Department Announces Funding Opportunities for Tribal</u> Communities

01/03/2018 12:00 AM EST

The U.S. Department of Justice today announced the opening of the grant solicitation period for comprehensive funding to federally-recognized American Indian and Alaska Native tribal governments and tribal consortia to support public safety, victim services and crime prevention.



SAVE-THE-DATE 8th Annual THRIVE Conference June 25-29, 2018

WHO: For American Indian and Alaska Native Youth 13-19 years old

- required for all adults facilitating or attending who did not attend in 2017.

 Activities, materials, lunch and snacks Mon-Thurs. will be provided.

 Travel, parking, lodging, breakfast and dinners are not included.

 ERE: To be determined in Portland. Oregon

LODGING: Once a location is set we will circulate group rates for a local hotel.

WHY: Build protective factors and increase your skills a sarn about healthy behaviors (suicidation through culture)

WHAT: This conference will be made up of FIVE (or six) workshop tracks and at registration each youth will need to rank their preference for which workshop they want to be in. Tracks may include: digital storytelling, movement, nutrition, art creation, physical activity, beats lyrics leaders (song writing and production), We Are Native youth ambassador leadership (additional application required), or a science and medical track sponsored by the Oregon Health and Science University.

#WeNeedYouHere

Contact Information:
Northwest Portland Area Indian Health Board's project THRIVE Website. http://www.npaihb.org/epicenter/project/thrive





PLEASE JOIN US AS WE WELCOME **WHEN** Feb 3:3 WHERE allam Tribe's **Port Gan Long Hou** 32020 Little Boston Rd NE,

Kingston, WA 98346

Port Gamble S'Klallam Health Services Department

Sponsored by:

Kingston, Washington

WASHINGTONS 2ND TRIBAL DENTAL HEALTH AID THERAPIST

- DHATs expand access to consistent, routine, high quality oral health and care,
- Educate patients about oral health and prevention
 - Perform dental evaluations
 - Give fluoride treatments
 - Place sealants
 - Clean teeth
 - Place fillings
 - Perform simple extractions
- Grow the number of AI/AN oral health care providers available to tribal communities.
- Create a more efficient and effective oral health team that brings care where it is needed most.
- Establish cost effective solutions to oral health challenges into tribal communities.



January 3, 2018

The Port Gamble S'Klallam Tribe (PGST) invites you to join us as we welcome a Dental Health Aide Therapist (DHAT) to our community and to work in our dental clinic. We are pleased to join other groundbreaking tribes in the Northwest as we celebrate this accomplishment.

When: February 1, 2018

Time: 3:30

Where: Port Gamble S'Klallam Tribe Longhouse, 31912 Little Boston Rd NE, Kingston WA 98346

What: Welcoming and Community Dinner

PGST supported DHAT legislation in Washington state with Resolution 15-A-021 supporting SB 5079, sponsored by Senator John McCoy, authorizing Dental Health Aide Therapist services in Washington State. The bill had widespread support from Tribes, bipartisan support in the legislature, and was signed into law by Governor Inslee in 2017. With the work of Swinomish, the Northwest Portland Area Indian Health Board and partnership with the Alaska Native Tribal Health Consortium, we are honored to join this important tribal initiative to increase access to dental care.

Please RSVP to Ms. Kim Freewolf at kfreewolf@pgst.nsn.us or 360-297-9645 by January 18, 2018.

I look forward to seeing you.

Sincerely Yours,

Jeromy Sullivan Chairman, Port Gamble S'Klallam Tribe The Oregon Health Authority (OHA), Office of Equity and Inclusion (OEI) has a unique opportunity for an experienced, policy driven professional with a passion for social justice, equity and inclusion to fill the position of ADA Coordinator/Civil Rights Investigator. This position follows the requirements of the Americans with Disabilities Act (ADA) to coordinate processes regarding modifications/accessibility and to perform audits and evaluations of OHA facilities and programs, including OHA contractors and subcontractors for compliance. Additionally, the incumbent will develop policies to address disparities and to promote equity and inclusion agency wide. Finally, the incumbent will advise OHA regarding systemic issues relating to civil rights (including conducting civil rights investigations), diversity, inclusion and cultural competence needs around the ADA.

What you will be doing?

You will monitor, manage and facilitate processes regarding modifications and access for the public under the American with Disabilities Act (ADA), including coordinating ADA requirements agency wide. You will develop and complete audits and evaluations for Oregon Health Authority (OHA) facilities and programs, including OHA service providers, contractors and subcontractors for accessibility and make recommendations to improve the physical, electronic and programmatic access to OHA and its services including advising on the accessibility of web and other technologies, facilities, programs and services. You will advise on the development and implementation of agency-wide training based upon relevant requirements for employees, managers, contractors and subcontractors through assessing organizational needs, as well as provide proactive consultation and technical assistance related to ADA guidelines, Oregon state standards and other relevant statutes, rules, and policies. You will work closely with the ADA Senior Human Resource Analyst in OHA Human Resources and conduct civil rights investigations for the agency as necessary.

The full job description and application requirements are available at: https://www.governmentjobs.com/careers/oregon/jobs/1889544/ada-coordinator-civil-rights-investigator-operations-and-policy-analyst-4



Embassy Suites by Hilton Portland Airport 7900 NE 82nd Avenue Portland OR 97220



January 16-18, 2018

AGENDA

TUESDAY, JANUARY 16, 2018 (PINE & SPRUCE ROOMS)

7:30 AM	Executive Committee Meeting	Juniper Boardroom
9:00 AM	Call to Order Invocation Welcome Posting of Flags Roll Call	Andy Joseph, Chairman Tanna Engdahl, Spiritual Leader, Cowlitz Tribe Cowlitz Chairman, Bill Iyall Cowlitz Color Guard Shawna Gavin, Treasurer
9:15 AM	Health Policy and Legislative Update – Part 1	Geoff D. Strommer, Partner – Hobbs, Straus, Dean & Walker, LLP
10:00 AM	Area Director Report (2)	Dean Seyler, Portland Area IHS Director
10:30 AM	BREAK	
10:45 AM	Executive Director Report	Joe Finkbonner, NPAIHB Executive Director
11:15 AM	Injury & Fall Prevention	Dr. Deborah Behre, Podiatrist with Skokomish Tribe
11:45 AM	Election of OfficersChairmanSecretary	
12:00 PM	LUNCH Committee Meetings (working lunch)	
	1. Elders	Staff: Clarice Charging
	2. Veterans	Staff: Don Head
	3. Public Health	Staff: Victoria Warren-Mears
	4. Behavioral Health	Staff: Stephanie Craig
	5. Personnel	Staff: Andra Wagner
	6. Legislative/Resolution	Staff: Laura Platero
	7. Youth	Staff: Nanette Star



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January 16-18, 2018

AGENDA

1:30 PM	Adverse Childhood Experiences (ACEs) and Resilience	Cow Creek Behavioral Health Team, Julie Hargraves, LCSW, BH Manager and Sandy Henry, Trauma-Informed Care Coordinator
2:00 PM	Veteran Affairs, Office of Tribal Government Relations Veteran Affairs Update	Mrs. Terry R. Bentley, Tribal Government Relations Specialist - Pacific District (OR, WA, ID, NV, CA, AK) U.S. Department of Veterans Affairs, Office of Government Relations and William Murray, VISN20
3:00 PM	Fetal Alcohol Syndrome Disorders (FASD) Wrap-up	Carolyn Hartness BA, FAS Contractor and Suzie Kuerschner BA, FAS Contractor
3:15 PM	BREAK	
3:30 PM	Endocrinology ECHO Pilot Project	Nanette Star, WEAVE NW Project Director and Kathi Murray MS, RDN, CDE, Portland Area IHS Diabetes Consultant
4:00 PM	NPAIHB MCH Workgroup	Tam Lutz, Tot2Tween & CARS Project Director and Monika Damron, IDEA NW Biostatistician
4:30 PM	Executive Session – <i>if needed</i>	
6:30 PM	Cultural Dinner and Presentation hosted by Cowlitz Tribe	Ilani Casino Resort (Transportation provided and valet services at Casino)



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January 16-18, 2018

AGENDA

WEDNESDAY JANUARY 17, 2018 (PINE & SPRUCE ROOMS)

9:00 AM	Call to Order Invocation	Cheryle Kennedy, Vice-Chairman
9:15 AM	Health Policy and Legislative Update – Part 2	Laura Platero, Government Affairs/Policy Director
9:30 AM	Hepatitis C	Jessica Leston, HIV/STI/HCV Clinical Program Manager
10:00 AM	US Department of Health and Human Services, Region 10	Barbara Greene, Acting Regional Director
10:30 AM	BREAK	
10:45 AM	Tulalip Housing – Rehabilitation of Meth houses	Thomas Dickerson, Maintenance Manager Tulalip Housing Department
11:00 AM	NPAIHB/NICWA Tribal Policy Toolkit	Nora Frank-Buckner, WEAVE-NW Project Coordinator
12:00 PM	LUNCH	
1:30 PM	Division of Information Resources (DIRM) and future of RPMS (via teleconference)	CAPT Mark Rives, DSc Chief Information Officer Director, Office of Information Technology Indian Health Service
2:15 PM	Tribal Updates 1. Nisqually Tribe 2. Puyallup 3. Quileute Tribe	



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January 16-18, 2018

AGENDA

3:00 PM	American Indian Health Commission – Emergency Preparedness Project	Lou Schmitz and Heather Herb, AIHC Consultants
3:30 PM	BREAK	
3:45 PM	Discussion on Youth Councils	Stephanie Craig-Rushing, THRIVE & PRT Project Director

THURSDA	AY, OCTOBER 12, 2017 (PINE & SPE	RUCE ROOMS)
8:30 AM	Call to Order Invocation	Andy Joseph, Chairman
8:45 AM	Chair's Report	Andy Joseph, Chairman
9:00 AM	Committee Reports: 1. Elders 2. Veterans 3. Public Health 4. Behavioral Health 5. Personnel 6. Legislative/Resolution 7. Youth 8. Any National Committee Updates	
10:30 AM	Unfinished/New Business 1. Finance Report	Eugene Mostifi, NPAIHB Fund Account Manager
	2. Approval of Minutes	

• October 2017



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January 16-18, 2018

AGENDA

- 3. Resolutions
- 4. Future Board Meeting Sites:
 - April 17-19, 2018 TBD
 - July 17-19, 2018 Bellingham, WA (Lummi)
 - October 16-18, 2018 TBD
 - January 2019- TBD

12:00 PM A

ADJOURN

Safe travels

2018 Tribal Endocrinology teleECHO Clinic———

- What Is Project ECHO?

(Extension for Community Healthcare Outcomes). The goal of this program is to increase the capacity of primary care providers to safely and effectively treat chronic, common, and complex conditions.

Project ECHO, through the use of technology, education, and research, increases knowledge of providers and health care professionals and strengthens best practice of care for all patients

Our Focus

Diabetes prevalence in Native American Communities is greater than 2 times that of non-Hispanic whites. Despite the high prevalence, access to endocrinology in IHS and Tribal clinics is limited. Optimizing blood sugar control in tribal communities would improve patient outcomes and improve quality of life.

- Improve quality of clinical services
- Increase experts in field
- Enhance community-clinical relationships
- Adopt cultural practices

Endo ECHO Pilot

Northwest Tribal Epidemiology Center (NWTEC) is starting an Endocrinology Clinic Pilot project in 2018. All tribal clinics in Idaho, Oregon, and Washington are invited to attend and participate.

We welcome you to submit a case presentation form or join in the teleECHO clinic on the second Thursday of every month starting April 12, 2018 from 10-11am PST.

For more information, contact us at weave@npaihb.org







Save the Date

Monday, January 29, 2018

12 pm to 1 pm (PST)



Cervical Cancer: Updates on prevention and screening strategies for special populations

Amanda Bruegl, MD (Oneida and Stockbridge-Munsee)

Northwest Tribal Cancer Coalition Webinar

Continuing Education Credits will be provided

Please contact Eric Vinson at evinson@npaihb.org or 503-416-3295 with any questions or comments at the Northwest Tribal Comprehensive Cancer Program of the

Northwest Portland Area Indian Health Board.

Online registration:

www.surveymonkey.com/r/Jan2019CervicalUpdate



Northwest Portland Area Indian Health Board

This meeting is supported by Centers for Disease Control and Prevention, National Cancer Prevention and Control Program Grant # 6 NU58DP006283-01-01



Response Circles Webinar Agenda

Northwest Portland Area Indian Health Board, Portland OR January 29, 2018: 10:00 -10:45 AM

10:00 AM WELCOME, INTRODUCTIONS

10:05 AM Changes and the NEW Response Circles

Local Programs: Strengths and Challenges

10:15 AM Upcoming Opportunities

Conferences, events, meetings, trainings

Scholarship requests

THRIVE Youth Conference

10:35 PM Questions & Answers

10:45 PM ADJOURN

Who Should Attend?

Domestic and sexual violence prevention workers and advocates, community health representatives, and those who would like to learn about opportunities around this topic! The NPAIHB serves its 43 member tribes in ID, OR, and WA so please note that much of the information may be geared toward this three-state region.

How do I log on to the Webinar? No pre-registration necessary.

• Join from PC, Mac, iOS or Android: https://echo.zoom.us/j/506799438

• Participant ID: Shown after joining the meeting

Meeting ID: 506 799 438

Questions? Please contact Colbie Caughlan at ccaughlan@npaihb.org or 503-416-3284 and Ethan Newcomb at enewcomb@npaihb.org or 503-416-3288 or check out: www.npaihb.org/sexual-assault-prevention-project/.



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 Shoshoni 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 Suguamish Tribe Swinomish Tribe Tulalip Tribe Umatilla Tribe Upper Skagit Tribe Warm Springs Tribe

2121 SW Broadway Suite 300 Portland, OR 97201 Phone: (503) 228-4185 Fax: (503) 228-8182 www.npaihb.org

Yakama Nation

"Response Circles" Funding Request for the Northwest Tribes

This form is to be used when requesting funding for an activity, event, or training that is associated with domestic & sexual violence prevention. The funds may be used for: meeting expenses, materials and supplies for activities, incentives, travel, and training fees. Funds may not be used for wages, food, or promotional clothing items i.e. t-shirts. Page 2 includes opportunities that can be funded. About \$15,000 is available for these requests by the Northwest Tribes and will be available until the money runs out. **Requests can be submitted anytime January 8 to August 15, 2018.**

Date:	
Tribe:	
Department:	
Address:	
Contact Person:	Phone:
-	
Briefly describe the activity, event, train	ning that the funds will be used for:
T . 1 A E . D (\$2.000	
Total Amount For Request (\$2,000 max	
	your needs including: indirect, travel, lodging, per materials, incentives, honoraria, stipends, trainer
fees and travel, and/or facility costs.	materiais, mentives, nonoraria, supentis, tramer
** Funds may not be used for wages, food, or p	romotional clothing items i.e. t-shirts.
•	-

*Depending on the event/training chosen NPAIHB staff may ask you to provide a short evaluation, survey, or post-description of the event/training. Please fax this document to 503-228-8182, Attn: Colbie, or email caughlan@npaihb.org. If you have any further questions, please call Colbie Caughlan: (503) 416-3284.

List of Upcoming Opportunities for Domestic & Sexual Violence Prevention

- March 12-18, 2018 Core DV/SA Advocacy Training Bend, Oregon https://www.surveymonkey.com/r/DK5FV5L
- March 26-30, 2018 SANE/SAE Training Southwestern Oregon Community College, Curry Campus http://oregonsatf.org/training/brookings-40-hour-sanesae-training/
- May 1-3, 2018 Annual Conference for the WA Coalition of Sexual Assault Programs Kennewick, WA http://www.wcsap.org/wcsap-2018-annual-conference
- May 7 11, 2018 Sexual Assault Examiner Training Portland, OR http://www.tribalforensichealthcare.org/page/Live
- May 21-23, 2018 40th Annual Conference for the Oregon Coalition Against Domestic & Sexual Violence New Visions for Safety, Equity, and Justice Sunriver, OR https://www.ocadsv.org/our-work/annual-conference
- June 26-28, 2018 13th Women Are Sacred Conference hosted by the National Indigenous Women's Resource Center Albuquerque, NM http://www.niwrc.org/events/women-are-sacred-conference
- August 29-30, 2018 National Sexual Assault Conference 2018 BOLD MOVES: Ending Sexual Violence in One Generation Anaheim, CA http://www.calcasa.org/events/nsac/2018-national-sexual-assault-conference/save-the-date/
- Sexual Assault Response Team (SART) Toolkit training on your own, check out https://ovc.ncjrs.gov/sartkit/about.html
- April 18, 2018 Developing a SART in Indian Country Webinar, CE's provided for some professionals http://www.tribalforensichealthcare.org/page/Webinars

Websites to find more opportunities & dates

- National Center on Domestic & Sexual Violence http://www.ncdsv.org/ncd_upcomingtrainings.html
- Sexual Assault Forensic Examinations, Support, Training, Access and Resources (SAFESTAR) http://www.safestar.net/training/
- International Assoc. of Forensic Nurses http://www.forensicnurses.org/?page=registerforSANE
- IHS Tribal Forensic Healthcare http://tribalforensichealthcare.site-ym.com
- Idaho Coalition Against Sexual & Domestic Violence https://idvsa.org/
- Oregon Attorney General's Sexual Assault Task Force http://oregonsatf.org/calendar/trainings/
- Oregon Coalition Against Domestic & Sexual Violence https://www.ocadsv.org/
- Washington State Coalition Against Domestic Violence https://wscadv.org/
- Washington Coalition of Sexual Assault Programs http://www.wcsap.org/



PLEASE JOIN US FOR THE 2018 CONTEMPORARY NORTHWEST TRIBAL HEALTH CONFERENCE APRIL 27-28, 2018

- Highlighting various health research efforts in American Indian/Alaskan Native (AI/AN) communities through oral and poster presentations, sharing best practices and lessons learned, and providing time for networking.
- All day Friday the 27th & the morning of Saturday the 28th
- Location: Native American Student & Community Center, Portland State University

FOR MORE DETAILS:

Please check NPAIHB's website at www.npaihb.org for more information. Additional questions can be addressed to Nancy Bennett at nbennett@npaihb.org





Job Posting Closing Date: 1/26/18

Status: Exempt, Salaried Job Title: Health Policy Analyst **Reports To:** Director of Government

Affairs/Policy Analyst

Starting Wage: \$65,000-75,000 DOE

Classification: 1.0 FTE, Regular Location: Portland, OR

Job Summary:

The Northwest Portland Area Indian Health Board (NPAIHB) provides health care advocacy on behalf of the 43 Tribes of Idaho, Oregon and Washington. The Policy Analyst supports the Director of Government Affairs and performs policy research, analysis, and development on American Indian/Alaska Native health, behavioral health, Medicaid/CHIP, Medicare, and veterans issues. This includes reviewing and interpreting federal and state policy; conducting research; analyzing data to determine policy options and impacts; developing policy recommendations; developing high quality legislative and policy documents for Northwest Tribes; and working individually and with other staff under direction of the Director of Government Affairs.

This job requires travel within the Northwest and to Washington, DC, occasional travel to other locations for regional or national meetings. Discretion, good judgment and ability to handle confidential information are required since this position is part of the health policymaking effort of Northwest Tribal Leaders.

Essential Functions:

- 1. Assists Director of Government Affairs with maintaining ongoing communication between NPAIHB, the Indian Health Service, tribes and other governmental agencies and tribal governments.
 - Prepares bi-weekly tracker of federal legislation, regulations, memoranda and other policy documents.
 - Prepares list of important Indian health policy calls.
 - Assists with legislative alerts and legislative updates.
 - Assists with articles to Health and News and Notes.
 - Assists with updating legislation/policy information on Board's webpage.
 - Assists with gathering information for weekly mail-out.
 - Scans internet sites and the media to provide information to tribes on health issues.
- 2. Works with Director of Government Affairs to provide timely Indian health policy information to Northwest tribes.
 - Analyzes federal and state laws, rules, regulations, and guidance relating to Indian health and behavioral health, Medicaid/CHIP, Medicare and veterans.
 - Conducts research on best practices.
 - Develops Indian health high quality legislative and policy documents (e.g., white papers, background papers, briefings, resolutions, testimony, comments, timelines, tables, charts, presentations, talking points, articles memoranda, etc.).

Job Posting Closing Date: 1/26/18

- Works with Northwest Tribes to request input on policies and determine impact on Northwest Tribes.
- Takes notes at meetings and provides meeting minutes as requested.
- Contributes to NPAIHB database of legislation and policy information.
- 3. Participates in policy meetings (in person, conference calls and webinars) and conferences with federal, state and tribal representatives.
 - Sets up policy meetings with federal, state and tribal representatives as requested.
 - Prepares meeting schedules and agendas as requested.
 - Tracks follow-up items from policy meetings.
 - Attends quarterly Board meetings and other meetings and conferences related to Indian health concerns as assigned.
 - Conducts and makes presentations at national, regional and local conferences as assigned.
 - Facilitates discussions at national, regional and tribal meetings and conferences as assigned.
- 4. Provides technical assistance to Northwest Tribes at national, regional and local conferences on health policy issues as assigned.
 - Tracks requests for information from federal, state and tribal representatives.
 - · Responds to requests for information as assigned.
 - Prepares Indian health legislative and policy information for Northwest Tribal leaders as assigned.
 - Briefs Northwest Tribal Leaders on Indian health legislative and policy issues as assigned.
- 5. Works with Director of Government Affairs to make efficient use of Board resources and organizational priorities.
 - Assists with preparation of quarterly report of activities for the Board and IHS.
 - Works closely with co-workers to identify policy options to ensure alignment with services and programs, and impacts based on research and data.
 - Works cooperatively with other NPAIHB staff in a team atmosphere that promotes the mission of the Board.

Additional Functions:

- Performs other duties and assignments as directed by the Director of Government Affairs.
- Prepares a Monthly Activity Report (MAR) and provides to the Director of Government Affairs at the end of each month.

Standards of Conduct:

- Consistently exhibit professional behavior and the high degree of integrity and impartiality appropriate to the responsible and confidential nature of the position.
- Consistently display professional work attire during normal business hours.

Job Posting Closing Date: 1/26/18

- Effectively plan, organize workload, and schedule time to meet workload demands.
- Maintain a clean and well-organized workstation and office environment.
- Exercise judgment and initiative in performance of duties and responsibilities.
- Work in a cooperative manner with all levels of management and with all NPAIHB staff.
- Treat NPAIHB delegates/alternates and Tribal people with dignity and respect and show consideration by communicating effectively.
- Participate willingly in NPAIHB activities.
- Abide by NPAIHB policies, procedures, and structure.
- Research and with the approval of supervisor, attend trainings as needed to improve skills that enhance overall capabilities related to job performance.

Qualifications:

- A Bachelor's Degree with a Master's Degree in public policy or health-related field.
- Two years of specific work experience which includes the preparation of written analyses of policies, legislation, regulations, etc. (Please provide two examples with application).
- Knowledge of Indian health policy and legislation, including the Medicaid, Medicare and Veteran's Administration programs is required.
- Experience working for a tribe or tribal organization is highly desirable.
- Must have excellent writing skills.
- Must have effective oral communication skills and experience in presenting information publicly.
- Must be highly organized and motivated, and be able manage complex projects and carry out all responsibilities of the job requirements with minimal day-to-day supervision.
- Must demonstrate discretion, tact, knowledge, judgment, and overall ability in working effectively with federal, tribal, and other professionals and facilitating participation and partnership in the activities of the program
- Must be sensitive to cross-cultural differences, and able to work effectively within their context.
- Advanced user in Microsoft Office package. (Access, Excel, Word, Publisher, PowerPoint).
- Must be able to travel, as requested.

Typical Physical Activity:

<u>Physical Demands:</u> Frequently involves sedentary work: exerting up to 10 pounds of force and/or a negligible amount of force to lift, carry, push, pull or otherwise move objects, including the human body.

Job Posting Closing Date: 1/26/18

Physical Requirements: Constantly requires the ability to receive detailed information through oral communications, and to make fine discrimination in sound. Constantly requires verbally expressing or exchanging ideas or important instructions accurately, loudly, or quickly. Constantly requires working with fingers rather than the whole hand or arm. Constantly requires repetitive movement of the wrists, hands and/or fingers. Often requires walking or moving about to accomplish tasks. Occasionally requires standing and/or sitting for sustained periods of time. Occasionally requires ascending or descending stairs or ramps using feet and legs and/or hand and arms. Occasionally requires stooping which entails the use of the lower extremities and back muscles. Infrequently requires crouching.

<u>Typical Environmental Conditions:</u> The worker is frequently subject to inside environmental conditions which provide protection from weather conditions, but not necessarily from temperature changes, and is occasionally subject to outside environmental conditions.

<u>Travel Requirements:</u> Local travel is required occasionally. Overnight travel outside of the area is frequently required.

<u>Disclaimer:</u> The individual must perform the essential duties and responsibilities with or without reasonable accommodation efficiently and accurately without causing a significant safety threat to self or others. The above statements are intended to describe the general nature and level of work being performed by employees assigned to this classification. They are not intended to be construed as an exhaustive list of all responsibilities, duties and or skills required of all personnel so classified.

Except as provided by Title 25, U.S.C. § 450e(b), which allows for Indian preference in hiring, the NPAIHB does not discriminate on the basis of race, color, creed, age, sex, national origin, disability, marital status, sexual orientation, religion, politics, membership or non-membership in an employee organization.

Applications can be found online at www.npaihb.org

SEND RESUME AND APPLICATION TO:

Human Resources Coordinator 2121 SW Broadway, Suite 300 Portland, Oregon 97201

FAX: (503) 228-8182 Email: <u>HR@npaihb.org</u>

STANDARD APPLICATION

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD (NPAIHB)

Name:FIRST	MIDDLE	LAS	T
Address:			
CITY		STATE	ZIP
Primary Phone:	Alternate	Phone:	
Email Address:			
Position for which you are app	olying:		
When will you be available for	r work?		
If the position requires travel,	are you willing to travel (Check	One) I NO I SO	ME OFTEN
Are you at least 18 years of ag	e? □ NO □ YES		
If you are under 18 years of ag	ge, can you provide proof of you	r eligibility to work?] NO □ YES
Are you eligible for employme	ent in the United States? (Proof	of identity and eligibilit	y is required for employmen
□ NO □ YES			
How did you hear of this job?	referral,ad Referred	by:	
Do you have any relatives who	o work at NPAIHB? NO	YES	
	nation is essential if you wish com, enrollment number, tribe,		
TRIBE	RE	SERVATION	
Enrollment Number/Blood Qu	antum		
Are you able to perform the ess	sential functions listed in the jol	announcement you are	applying for, either with or

11. EDUCATION, beginning with most recent. An attached copy of degree or certificates earned is required.

College or University	From	To	Credits earned	Major/minor	Degree earned	Year
High School attended:	1				Graduated? Yes/No	Year
GED completion through:					Yes/No	
Other schools or training: voo location, dates attended, subject earned. If needed, continue on	ts studied,	numbe	r of classroom ho			
Name and Location	From	То	Area of study	Credits earned	Certificate earned	Year
Trume and Eccuron	110111	10	Thea of study	Creatis carned	Continuate carried	1 cui

12. COMPUTER and other office machine experience, training. Please name the software with which you have experience in the following areas:

TASK	Name of software	Level of expertise 0-5, (5 being master/high)
Word processing		
Spreadsheet set-up and usage		
Office E-mail system experience		
Data Management		
High-level data analysis		
Photo-text slide presentations		
Preparation of brochures, flyers		
Other (fax, copier, scanner, etc.)		

STANDARD APPLICATION

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD (NPAIHB)

employn (A "no"		☐ With	ng your character, qualifications, and rec advance notice to applicant	cord of
Α.				
From:(To: Date)	(Date)	Title of Position:	
Average Hours Per Week:	Place of Employment City: State:	Number and Jo	bb Titles of Employees Supervised:	Kind of Business:
Name of Supervision Phone Number:		N	Name and Address of Employer:	
Reason for leavin	g position:	1		
Description of du	ties, responsibilities and acco	mplishments: Ado	litional space is provided at the end of a	pplication.
B				
B. From:(To: Date)	(Date)	Title of Position:	
From:			Title of Position: Job Titles of Employees Supervised:	Kind of Business
From:(Average Hours Per Week: Name of Supervise Phone Number:	Place of Employment City: State:	Number and J		Kind of Business
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STANDARD APPLICATION

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD (NPAIHB)

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YOU <u>MUST SIGN</u> THIS APPLICATION. Read the following three parts carefully before you sign:

• A false statement on any part of this application may be grounds for not hiring me, or firing me after I begin work. I understand that any information I give may be investigated as allowed by law or Presidential order.

STANDARD APPLICATION

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD (NPAIHB)

- In consideration of NPAIHB's review of my application for employment, I hereby authorize NPAIHB and its agents to investigate my background as it pertains to employment considerations. This may include, but is not necessarily limited to, investigation of past employers/supervisors, personal references, educational institutions, criminal records/background checks, motor vehicle records and information contained in public records. I consent to the release of information to NPAIHB, by all persons and sources of information and their agents, relative to such investigation. I hereby release all such persons and sources of information and their agents from any liability or damages on account of having furnished information to the NPAIHB, and release the NPAIHB and its agents from any liability or damages on account of having conducted the investigation.
- hereby release all such persons and sources of information and their agents from any liability or damages on account having furnished information to the NPAIHB, and release the NPAIHB and its agents from any liability or damages account of having conducted the investigation.

 I certify that, to the best of my knowledge and belief, all of my statements contained in my employment application and any attached documentation are true, correct, complete and made in good faith.

 SIGNATURE

 DATE

 Except as provided by Title 25, U.S.C. § 450e(b), which allows for Indian preference in hiring, the NPAIHB does not discriminate on the basis of race, color, national origin, sex, creed, age, disability, marital status, sexual orientation, religion, politics, membership or non-membership in an employee organization.

Please submit your completed form to: Human Resources Coordinator

Northwest Portland Area Indian Health Board

2121 SW Broadway, Suite 300

Portland, OR 97201 Or FAX to: 503-228-8182 Or e-mail to: HR@npaihb.org



PRESS RELEASE

FOR IMMEDIATE RELEASE Jan 11, 2018

Contact: CMS Media Relations (202) 690-6145 | CMS Media Inquiries

CMS announces new policy guidance for states to test community engagement for able-bodied adults

Will support states helping Medicaid beneficiaries improve well-being and achieve self-sufficiency

CMS today announced new guidance that will support state efforts to improve Medicaid enrollee health outcomes by incentivizing community engagement among able-bodied, working-age Medicaid beneficiaries. The policy responds to numerous state requests to test programs through Medicaid demonstration projects under which work or participation in other community engagement activities – including skills training, education, job search, volunteering or caregiving – would be a condition for Medicaid eligibility for able-bodied, working-age adults. This would exclude individuals eligible for Medicaid due to a disability, elderly beneficiaries, children, and pregnant women.

The new policy guidance sent to states is intended to help them design demonstration projects that promote the objectives of the Medicaid program and are consistent with federal statutory requirements. To achieve the objectives of Medicaid, state programs should be designed to promote better physical and mental health.

"Medicaid needs to be more flexible so that states can best address the needs of this population. Our fundamental goal is to make a positive and lasting difference in the health and wellness of our beneficiaries, and today's announcement is a step in that direction," said Seema Verma, CMS Administrator.

To date, CMS has received demonstration project proposals from 10 states that include employment and community engagement initiatives: Arizona, Arkansas, Indiana, Kansas, Kentucky, Maine, New Hampshire, North Carolina, Utah and Wisconsin.

"Our policy guidance was in response to states that asked us for the flexibility they need to improve their programs and to help people in achieving greater well-being and self-sufficiency," said Verma.

Announcement of the new guidance delivers on the commitment made by Administrator Verma in

her <u>address to state Medicaid directors</u> last November, to "turn the page" in the Medicaid program and give states more freedom to design innovative programs that achieve positive results for the people they serve and to remove bureaucratic barriers that block states from achieving this goal.

Criteria and Parameters of the New Policy Guidance

CMS has identified a number of issues for states to consider in the development of proposals to promote work and other community engagement among working-age, non-pregnant Medicaid beneficiaries not eligible for Medicaid on the basis of a disability.

Meeting work and community engagement requirements should take into consideration areas of high unemployment or caregiving for young children or elderly family members. States will therefore be required to describe strategies to assist eligible individuals in meeting work and community engagement requirements and to link individuals to additional resources for job training, provided they do not use federal Medicaid funding to finance these services.

CMS will support state efforts to align Medicaid work and community engagement requirements with SNAP or TANF requirements, where appropriate, as part of this demonstration opportunity. Aligning requirements across these programs may streamline eligibility and reduce the burden on both states and beneficiaries and help beneficiaries succeed in meeting their work and community engagement responsibilities.

States must also fully comply with federal disability and civil rights laws and ensure that all individuals with disabilities have the necessary protections to ensure that they are not inappropriately denied coverage. States will be required to offer reasonable modifications to individuals with disabilities, and will be required to exempt individuals determined to be medically frail or who have an acute condition that a medical professional has determined will prevent them from complying with the requirements.

Administrator Verma cited the Administration's firm commitment to combat our nation's opioid crisis and the letter outlines that CMS will require states to make reasonable modifications for individuals with opioid addiction and other substance use disorders. These modifications may include counting time spent in medical treatment toward an individual's community engagement requirements or exempting individuals participating in intensive inpatient or outpatient medical treatment, as well as supporting other state efforts.

CMS also encourages states to consider a range of activities that could satisfy work and community engagement requirements. States should ensure that career planning, job training, referral, and volunteering opportunities considered to meet the community engagement requirement, and job support services offered in connection with the requirement, take into account people's employability and potential contributions to the labor market.

"States have the opportunity to help individuals improve and enhance the skills that employers truly value," said Verma. "People who participate in activities that increase their education and training are more likely to find sustainable employment, have higher earnings, a better quality of life, and, studies have shown, improved health outcomes."

Medicaid Demonstration Projects

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services authority to approve experimental, pilot, or demonstration projects determined by the Secretary to be likely to assist in promoting the objectives of the Medicaid program. Demonstrations, which give states additional flexibility to design and improve their programs, are also designed to evaluate state-specific policy approaches and

better serve Medicaid populations.

Administrator Verma also announced that CMS has updated Medicaid.gov to give states a clearer indication of how their reform strategies under section 1115 should align with a core objective of the Medicaid program: serving the health and wellness needs of the nation's vulnerable and low-income individuals and families. The revised website content signals a new, broader view of these demonstrations in which states can focus on evidence-based approaches that drive better health outcomes, and quality of life improvements, and support upward mobility and self-sufficiency.

On March 14, 2017, the Department of Health and Human Services and CMS issued a letter to the nation's governors affirming the federal government's partnership with states to improve the integrity and effectiveness of the Medicaid program for low-income people with Medicaid. The letter encourages states to bring forward proposals grounded in ideas that reflect the dynamics and culture of a state.

"This new guidance paves the way for states to demonstrate how their ideas will improve the health of Medicaid beneficiaries, as well as potentially improve their economic well-being," said Brian Neale, CMS Deputy Administrator and Director for the Center for Medicaid and CHIP Services.

To view a copy of the SMD letter # 18-002, please click here.

#

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Priorities | Resources | Advisory Committees | Self-Governance | Events | Health Reform

AFFORDABLE CARE ACT (ACA)/INDIAN HEALTH CARE IMPROVEMENT ACT (IHCIA) January 10, 2017

Indian Health Service Reimbursement Rates for 2018

On January 5, 2018, a notice was published in the Federal Register2 announcing that the IHS Acting Director, under the authority of sections 321(a) and 322(b) of the Public Health Service Act, Public Law 83-568, and the Indian Health Care Improvement Act, has approved the following rates for inpatient and outpatient medical care provided by IHS facilities for CY 2018 for Medicare and Medicaid beneficiaries, beneficiaries of other federal programs, and for recoveries under the federal Medical Care Recovery Act. This following Tribal Self-Governance Advisory Committee (TSGAC) brief provides information to Tribes on Indian Health Service (IHS) reimbursement rates-also known as "OMB rates" or "encounter rates"-for calendar year (CY) 2018.

(Click link below to read the complete TSGAC Brief)

Click Here

Thank you.

If you have questions about this broadcast, please contact Doneg McDonough, TSGAC Technical Advisor, at DonegMcD@Outlook.com.

VISIT OUR WEBSITE

REGISTRATION FOR THE HHS REGION 10 ANNUAL TRIBAL CONSULTATION IS NOW OPEN!

May 2, 2018

Little Creek Casino Resort

Shelton, WA

The U.S. Department of Health and Human Services (HHS) Region 10 will conduct its annual Tribal Consultation for Tribes in Alaska, Idaho, Oregon, and Washington on Wednesday, May 2, 2018, at the Little Creek Casino Resort, 91 WA-108, Shelton, WA 98584.

We will also hold 1-1 meetings with Tribal Leaders upon request on Tuesday, May 1, 2018, at the same location. If you do not request such a meeting, you do not need to attend Day 1.

Outline of Events

Day 1 (Tuesday, May 1) – OPTIONAL One-on-One Meetings: These short meetings are an opportunity for Tribal leaders and organizations to briefly share specific concerns and information with federal officials from HHS operating divisions. It is not intended to be a formal consultation. If you register for a one-on-one meeting, please send your issues AS SOON AS POSSIBLE to Nicholson.massie@hhs.gov so we can be prepared to respond.

The schedule for 1:1 meetings will be developed based upon requests. Please anticipate approximately a 20 minute meeting between 8:00AM PT and 6:00PM PT. Please register for 1:1 meetings as soon as possible so we can set the schedule.

Day 2 (Wednesday, May 2) – Tribal Consultation: The agenda for Day 2 is in development but will include Opening and Tribal Blessing, Regional Welcome, Tribal Leader Introductions, Open Tribal Leader Comments, and Closing Remarks.

We anticipate Day 2 will run from 9:00AM PT until 5:00PM PT, but is subject to change.

To Register for the Consultation Follow These 2 Simple Steps:

Step 1: Register to attend the May 2 Consultation through the link below by Monday, April 16, 2018.

https://www.surveymonkey.com/r/8T6GJJY

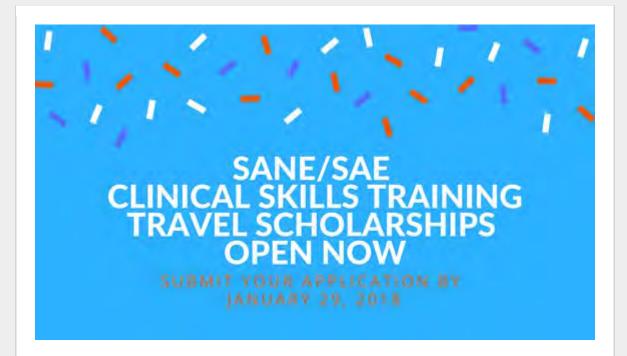
Use this link if you would like to schedule a one-on-one meeting for Tuesday, May 1. If you are not scheduling a one-on-one meeting, you do not need to attend on Day 1. There are limited slots for one-on-one meetings; once we finalize a schedule we will confirm the time and location for your meeting.

Step 2: Secure hotel accommodations at the Little Creek Casino Resort by Saturday, March 31.

Please visit the Little Creek Casino Resort reservations website at https://uslcc.webhotel.microsdc.us/bp/search_rooms.jsp and use **Group Code 050118USDE**. Please secure your accommodations by **Saturday, March 31, 2018,** to receive the special rate of \$93/night.

If you have any questions about the Consultation session, please contact Nicki Massie at Nicholson.massie@hhs.gov.





SANE/SAE Clinical Skills Training Opportunity

The Oregon Attorney General's Sexual Assault Task Force, in collaboration with the Oregon Department of Justice and the Office for Victims of Crime Training and Technical Assistance Center, is offering scholarship applications to send a limited number of SANE/SAEs in Oregon to an out-of-state clinical skills training facility. Eligible SANE/SAE's must have completed the 40-hour didactic adult/adolescent SANE/SAE training.

We have already coordinated travel for 8 SANEs to travel to St. Paul, Minnesota and Houston, Texas to complete their clinical skills training this year. We're committed to sending more with support from our funders.

Priority will be given to providers who practice in regions of Oregon where access to medical-forensic care is limited and to SANE/SAEs who are actively pursuing their certification. Scholarships will cover registration, air-fare, baggage, lodging, and per diem at the federal rate, up to \$1,000 per participant.

Applications must be submitted by January 29, 2018

Apply by January 29th!

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Our mailing address is: taskforce@oregonsatf.org

Want to change how you receive these emails? You can <u>update your preferences</u> or <u>unsubscribe from this list</u>

2017-ISSUE 149

N C C D P H P GOOD HEALTH AND WELLNESS IN INDIAN COUNTRY TRIBAL RESOURCE DIGEST

Welcome to Centers for Disease Control and Prevention's (CDC) tribal resource digest for the week of December 25, 2017. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.



Adrian Dominguez, UIHI

APHA 2017

Photo courtesy of David Espey

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Request for Photos

Please send any photos of GHWIC work (community gardens, events, team meetings, etc.) to Anisha Quiroz, <u>AQUIROZ@cdc.gov</u> with a short description of the photo.

Announcements

Prevalence and Disparities in Tobacco Product Use Among American Indians/Alaska Natives — United States, 2010–2015

Providing evidence-based, population-level, and culturally appropriate tobacco control interventions could help reduce tobacco-product use among American Indians and Alaska Natives.

merican Indians and Alaska Natives (Al/ANs) have one of the highest rates of tobacco-product use among all racial/ethnic groups in the United States. During 2010–2015, current (past 30-day) tobacco-product use was significantly higher among Al/ANs than non-Al/ANs for any tobacco product (43.3 percent vs. 27.7 percent); for cigarettes (37.3 percent vs. 23.0 percent); for roll-yourown tobacco (7.1 percent vs. 3.5 percent); for pipes (1.9 percent vs. 0.9 percent); and for smokeless tobacco (6.6 percent vs. 3.5 percent). Among Al/ANs, prevalence of any tobacco product use was higher among males, persons aged 18–25 years, those with less than a high school diploma, an annual family income of \$20,000 or less, those who lived below the poverty level, and among those who never married. Link: https://www.cdc.gov/mmwr/volumes/66/wr/mm6650a2.htm? s cid=mm6650a2 w



APHA 2018 Call for Abstracts

he 2018 Call for Abstracts is now open! We invite you to submit an abstract for APHA's 2018 Annual Meeting and Expo in San Diego, Nov. 10-14. The 2018 theme is "Creating the Healthiest Nation: Health Equity Now." Submit an abstract related to the theme or from any area of public health.

Submission Deadline: Feb. 19-23, depending on the topic area

Abstract Status Notification: June 4, 2018
Registration and Housing open: June 4, 2018

You do not have to be an APHA member to submit an abstract. However, if your abstract is accepted for presentation, the presenting author must become an individual member of APHA and must register for the Annual Meeting by the Advance Deadline. Learn more about deadline requirements for presenters.

Tips from Former Smokers™

he *Tips From Former Smokers* campaign features real people suffering as a result of smoking and exposure to secondhand smoke.

http://www.plowsharegroup.com/media_downloads/ cdc tobacco education.php



Place-Based Food Systems Conference

lace-Based Food Systems 2018: Making the Case, Making It Happen is a two-day conference highlighting the critical efforts of, and synergies between, researchers and community innovators who are working to forge vital place-based food systems. Proposals are now being accepted. Read more here and here and here.

Submission Deadline: March 31, 2018

When: August 9-10, 2018

Where: Richmond (Metro Vancouver), British Columbia, Canada



Health Justice: Empowering Public Health and Advancing Health Equity

e are accepting abstracts for proposed panels and individual

Submission Deadline: December 31, 2017

When: October 4-6, 2018 Where: Phoenix, AZ



In A Good Way: Indigenous Commercial Tobacco Control Practices

13th Annual Tribal Leader/Scholar Forum

he NCAI Policy Research Center's (PRC) Annual Tribal Leader Scholar Forum provides an opportunity for researchers, practitioners, community members, and others to present research and data findings to tribal leaders, policymakers, and tribal members during the NCAI Mid Year Conference. Presenters are asked to submit proposals that provide data and research that is relevant to tribal leaders. Read more here.

Submission Deadline: December 15, 2017

When: June 5, 2018 Where: Kansas City, MO



Save the Date — National Rural Grocery Summit VI Strengthen Community; Strengthening Health:
The Rural Grocery Store

illions of rural residents now face limited choice and low quality in their retail food choices. Eight percent of the U.S. rural population—approximately 4.75 million people—live in communities lacking access to healthy foods. Registration will open early 2018. Read more here.

When: June 25-26, 2018 Where: Manhattan, KS

Webinars

Chickasaw Nation Tackles the Opioid Epidemic

efine Your Direction is a comprehensive prescription opioid abuse prevention movement created by the Chickasaw Nation using Substance Abuse and Mental Health Services Administration (SAMHSA) and Southern Plains Tribal Health Board funding. In 2014, Oklahoma ranked 10th in the nation for drug overdose deaths. Read more and register here.

When: January 25, 2018 @ 3EST

Funding Opportunities

Tribal Practices for Wellness in Indian Country

DC convened tribal health leaders to increase understanding of tribal practices that strengthen physical and mental health, wellbeing, tribal identity, and connection to culture to better support the work tribes and their members do to stay healthy and well.

The Frequently Asked Questions for this new Notice of Funding Opportunities is now available. Read more here.

Contact Information

National Center for Chronic Disease Prevention and Health Promotion

Office of the Medical Director 4770 Buford Highway, MS F80 Atlanta, GA 30341 (770) 488-5131

http://www.cdc.gov/chronicdisease/index.htm

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Anisha Quiroz at AQUIROZ@cdc.gov with the words "TRIBAL DIGEST" in the subject line.



HEALTH & WELFARE

(

MATT WIMMER - Administrator DIVISION OF MEDICAID Post Office Box 83720 Boise, Idaho 83720-0009 PHONE: (208) 334-5747 FAX: (208) 364-1811

December 22, 2017

RUSSELL S. BARRON - Director

Dear Tribal Representative:

This is to let you know that Idaho Medicaid intends to submit a State Plan Amendment (SPA) to calculate a Medicare Federal Upper Payment Limit (FUPL) for Durable Medical Equipment (DME) that shows, on an annual basis, that Medicaid is paying in the aggregate no more than what Medicare pays. We intend to submit the SPA no later than February 28, 2018.

The FUPL calculation will use all Medicare rate areas in the state, including competitive bidding areas located in urban counties. The FUPL methodology will allow the Division of Medicaid to determine fees for DME and medical supplies when the Medicare rate is insufficient for the Idaho Medicaid population or could result in a potential access issue.

The effective date is January 1, 2018. There is no expected increase or decrease in annual aggregate expenditures.

Idaho Medicaid's development of the proposed SPA will be reviewed as part of the Policy Update at the next quarterly Tribal meeting scheduled for February 22, 2018. Idaho Medicaid is interested in receiving your comments, questions or suggestions relating to this change. Should you have questions regarding this SPA, please contact KayLee Leavitt, Senior Financial Specialist, Office of Reimbursement, Bureau of Financial Operations, Division of Medicaid at (208) 287-1175 or kaylee.leavitt@dhw.idaho.gov prior to February 22, 2018.

Sincerely.

MATT WIMMER Administrator

MW/kl