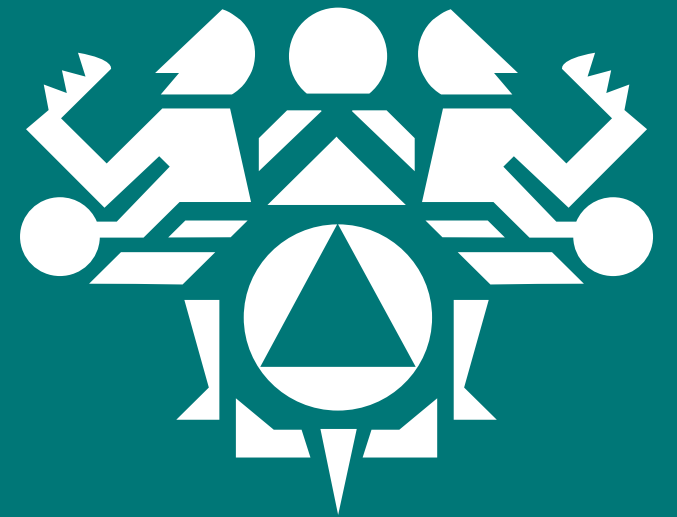


# NPAIHB

## Weekly Update

January 27, 2026





NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD  
*Indian Leadership for Indian Health*

# Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- Legislative & Policy Updates: Pakak Sophie Boerner
- Communicable Diseases Updates: Dr. Tara Perti, PAIHS
- Other Updates, Questions & Comments

Please sign in, using the chat box, with your full name and tribe or organization



# Northwest Tribal Public Health Emergency Preparedness Conference & Training

**Register:** [tinyurl.com/2026TPHEPReg](https://tinyurl.com/2026TPHEPReg)

**Submit a Presentation Proposal:**  
[www.surveymonkey.com/r/2026Presenter](https://www.surveymonkey.com/r/2026Presenter)

**More Info:** [www.npaihb.org/TPHEP2026](https://www.npaihb.org/TPHEP2026)

**May 4 – 8, 2026**  
**Quinault Beach Resort & Casino**  
**Ocean Shores, WA**

Questions? Contact the planning team @ NPAIHB at [tphep@npaihb.org](mailto:tphep@npaihb.org)



# **ZERO**Suicide Workshop

## **What is a Zero Suicide Workshop?**

The Zero Suicide Workshop is your opportunity to learn from experts in Zero Suicide implementation.

During the workshop teams will learn best practices, strategies to overcome challenges, and strategic guidance.



NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD

## **SAVE THE DATE**

The Northwest Portland Area Indian Health Board is hosting a 1-day Zero Suicide Workshop in Portland, Oregon.

**May 6, 2026**  
**8:30 a.m.-4:00 p.m.**

## **Who Should Attend?**

Tribal and Urban Indian Health organizations who currently implement Zero Suicide and care for people who may be at risk of suicide.

May 7, 2026 8:30 a.m.-12:30 p.m.

IHS Zero Suicide Initiative Grantee Meeting for 2022 IHS ZSI Tribal/ UIO Grantees only.

Please address questions to  
Helena Darrow  
hdarrow@npaihb.org

**Registration Opens  
February 2, 2026**

Reserve your hotel stay by April 14th at  
<https://www.marriott.com/event-reservations/reservation-link.mi?id=1757701801728&key=GRP&app=resylink>



More info: <https://www.npaihb.org/modernevent/zerosuicide-workshop/>



# Summer Research TRAINING INSTITUTE

for American Indian and Alaska Native Health  
Professionals and Students

Improve your research skills  
with short courses in  
Epidemiology, Community  
Based Participatory Research,  
Data Science, and more!



June 8-19, 2026



9AM-4:30PM



Portland, Oregon



## GOAL

The goal of the NW NARCH is to improve tribal health by increasing the number of American Indian and Alaska Native (AI/AN) people who are engaged in biomedical and social science research and who can bring the benefits of academic research into their communities.

## APPROACH

The SRTI curriculum is designed for AI/AN health professional and student research training needs. Each trainee may create a customized course schedule. Certificates of completion are awarded at the end of each course.

## SPONSORS

National Institutes of Health  
under Award Number  
1S06GM141002

Northwest Portland Area Indian  
Health Board

Native American Research  
Center for Health

**REGISTRATION COMING SOON**

Questions? Email us at [summerinstitute@npaihb.org](mailto:summerinstitute@npaihb.org)







Northwest  
Native American  
Research Center  
for Health

## TRIBAL RESEARCHERS' CANCER CONTROL FELLOWSHIP PROGRAM

**APPLICATIONS DUE  
MARCH 20, 2026**

### FELLOWS WILL:

- Attend a 2-week in-person training June 8-19, 2026
- Receive distance learning, peer & career mentorship
- Connect with a network of experts in cancer control and prevention in Indian Country

### FOR MORE INFO

- Ashley Thomas, MPH  
Senior Program Manager
- [athomas@npaih.org](mailto:athomas@npaih.org)

2026



### SPONSORED BY

National Institute of Medical Sciences of the Department of Health and Human Services  
Native American Research Centers for Health | Epidemiology and Area Indian Health Board

# Upcoming Indian Country ECHO Telehealth Opportunities

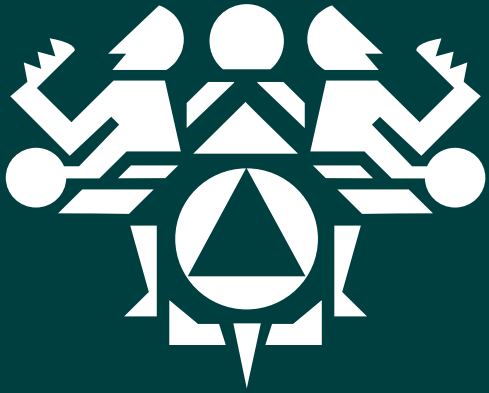
- **Care & Access for Pregnant People ECHO** – 4<sup>th</sup> Tuesdays at 11am PT
  - Tuesday, January 27<sup>th</sup> at 11am PT
  - Didactic Topic: *Cervical Cancer Screening Best Practices*
  - To join via Zoom: <https://echo.zoom.us/j/87128078680?pwd=c2hMOEFnWU9QWVZMd2dpLOJ0ODNidz09>
- **Indian Country ECHO – General Session (Form. Grand Rounds)**
  - Tuesday, January 27<sup>th</sup> at 12pm PT
  - Didactic Topic: *Screening for Infectious Diseases in the Phoenix Indian Medical Center Emergency Room – A High Impact Intervention*
  - To join via Zoom: <https://echo.zoom.us/j/99475693462?pwd=NGlaMjBrNHZkcjBOSXRySHNHMzB4Zz09>
- **Hepatitis C (HCV) ECHO** – 1<sup>st</sup>, 3<sup>rd</sup> & 4<sup>th</sup> Wednesday monthly at 11am PT
  - Wednesday, January 28<sup>th</sup> at 11am PT
  - Didactic Topic: *Hepatitis B Vaccines*
  - To join via Zoom: <https://echo.zoom.us/j/537117924?pwd=OEExbERmK2pSUFFsMzV1SmVpb3g3dz09>
- **Early Relational Health (ERH) ECHO** – 4<sup>th</sup> Wednesday monthly at 12pm PT
  - Wednesday, January 28<sup>th</sup> at 12pm PT
  - Didactic Topic: *Pain Syndromes in Childhood*
  - To join via Zoom: <https://echo.zoom.us/j/86327376612?pwd=YVRiY0dxeXV1Ukl2ZE9objU2U2hrZz09>

# NPAIHB Weekly Update Schedule

- February 3: Topic TBD / WA DOH Updates
- February 10: Tribal Community Health Provider Program (TCHPP)
- February 17: N CREW Research Topic: Writing Methods, including Data Collection & Strengthening Applications
- February 24: Legislative & Policy Updates







# Legislative & Policy Monthly Updates

# Agenda

- **Congressional & Federal Updates**
- **DTLL**
- **National & Regional Meetings**
- **Consultations, Listening Sessions, & Written Comments**
- **Policy Resources**



# Congressional



# Congressional

## Appropriations:

- Three FY 2026 appropriations bills spending package (H.R. 6938) that includes Commerce, Justice, Science, Energy and Water Development, and Interior and Environment, have been signed into law.
- There are 6 remaining appropriation bills to pass.
- In the last few weeks, the House has passed two minibus each combining 3 appropriations
- The recently House passed appropriations are being combined with the previously passed FY 2026 spending package that combines the Financial Services/General Government and National Security/Department of State appropriations bills (H.R. 7006) to create a 6-bill minibus.

[Appropriations Tracker](#)

# Congressional

## **Partial Shutdown Concerns:**

On January 24, 2026, ICE shot and killed a man in Minneapolis adding to the growing number of deaths at the hands of the Department of Homeland Security ICE agents. Due to the unfortunate and unnecessary killings from ICE, demonstrations, protests, and general outcry have caused Congress to halt legislative action as many Senate Democrats are calling for decreased funding to DHS which had just passed from the House.

It is unclear/unlikely that Senate Republicans are willing to alter the House passed bill, risking a partial shutdown at the end of this week.

The White has released a statement encouraging Senate Democrats to support the 6-bill minibus that includes funding for DHS.



# Congressional

## The Great American Healthcare Plan

Since the lapse of the Affordable Care Act (ACA) insurance premium tax subsidies many low-income Americans are experiencing spikes in their insurance costs. In response both Congress and the White House have been working on various methods to address these price increases.

On **January 8**, House members passed legislation to extend the expired healthcare subsidies (with restriction) for the next 3 years. The bill now sits with the Senate who are expected to vote on the bill shortly.

However, on **January 22** the White House also announced “The Great American Healthcare Plan” proposal, relying on Congress to draft legislation. However, the outline released does not provide significant details on the proposal.

Read the official proposal [here](#).

# Federal Updates



# Federal Updates

## Funding Terminations

In the last week, the Trump administration has made several notices impacting funding terminations that have been rescinded within the day of their announcements. These funding sources include billions of dollars to SAMHSA, and funding pauses to CDC. Although no grants were terminated to CDC recipients, the following chaos and confusion shows a concerning pattern for these vital funding sources and programs.

# Dear Tribal Leader Letters



# IHS Health Information Technology (HIT) Modernization Program

IHS is continuing to gather comments and feedback on the HIT Modernization Program. The are adding two additional information sessions:

- **March 5, 2026:** Health IT Modernization Program leadership will provide program and pilot site updates, focusing on enterprise acceptance of PATH EHR, End-User Training, Four Directions Warehouse, Patient Portal, site design workshops, and Change Impacts.
- **August 6, 2026:** will provide an overview of the pilot site after PATH EHR goes live and share plans for future cohorts.
- To register: [IHS Event Calendar](#) or [Health IT Modernization Event](#)

Comments and recommendations on each session **are due within 30 days** following each scheduled session.

**Email:** [consultation@ihs.gov](mailto:consultation@ihs.gov) or [urbanconfer@ihs.gov](mailto:urbanconfer@ihs.gov).

**Subject Line:**

- Health IT Modernization CY 03-5-2026
- Health IT Modernization CY 08-6-2026



# Federal Register Notice (FRN) for the calendar year (CY) 2026 All-Inclusive Rates (AIR)

On January 22 IHS Acting Director Clayton Fulton announced that the Federal Register Notice (FRN) for the calendar year (CY) 2026 All-Inclusive Rates (AIR) was published.

The CY 2026 rates can be accessed [here](#).

Additionally, the Centers for Medicare & Medicaid Services (CMS) has issued a Final Rule to continue to pay an add-on to the Medicare Outpatient Per Visit Rate for certain high-cost drugs for people with Medicare who receive care at IHS or Tribal hospitals for CY 2026

High-cost drug list can be accessed [here](#).

# IHS Scholarship Program 2026-2027

## December 18 DTLL:

December 18, 2025, IHS announced the eligible programs for the IHS Scholarship Programs (IHSSP) for the academic year 2026-2027.

[Link to scholarship programs here](#)

2026-2027 IHS SCHOLARSHIP PROGRAM (IHSSP) ELIGIBLE DEGREE PROGRAMS				
Degree Programs	Preparatory, Pre-Graduate, & Health Professions Scholarship Programs			
	Associate Degree	Bachelor's Degree	Master's Degree	Doctoral Degree
Clinical Laboratory Science	None	Health Professions <sup>2</sup>	None	None
Clinical Psychology	None	None	None	Health Professions <sup>2</sup>
Dental Hygiene	None	Health Professions <sup>2</sup>	None	None
Dental Therapy	Health Professions <sup>2</sup>	None	Health Professions <sup>2</sup>	None
Dentistry	None	Pre-Graduate <sup>1</sup>	None	Health Professions <sup>2</sup>
Diagnostic Radiology	Health Professions <sup>2</sup>	Health Professions <sup>2</sup>	None	None
Engineering (Civil or Environmental)	None	Health Professions <sup>2</sup>	None	None
Environmental Health	None	Health Professions <sup>2</sup>	None	None
Medicine – Allopathic	None	Pre-Graduate <sup>1</sup>	None	Health Professions <sup>2</sup>
Medicine – Osteopathic	None	Pre-Graduate <sup>1</sup>	None	Health Professions <sup>2</sup>
Mental Health Counseling	None	None	Health Professions <sup>2</sup>	None
Nursing	See Nursing Chart <sup>3</sup>	See Nursing Chart <sup>3</sup>	See Nursing Chart <sup>3</sup>	See Nursing Chart <sup>3</sup>
Occupational Therapy	None	None	Health Professions <sup>2</sup>	Health Professions <sup>2</sup>
Optometry	None	None	None	Health Professions <sup>2</sup>
Pharmacy	None	Preparatory <sup>1</sup>	None	Health Professions <sup>2</sup>
Physical Therapy	None	Preparatory <sup>1</sup>	None	Health Professions <sup>2</sup>
Physician Assistant	None	Pre-Graduate <sup>1</sup>	Health Professions <sup>2</sup>	None
Podiatry	None	None	None	Health Professions <sup>2</sup>
Social Work	None	None	Health Professions <sup>2</sup>	None

# IHS Realignment Consultations

On **November 13, 2025**, IHS published a Dear Tribal Leader Letter announcing a plan to realign the structure of the agency. Between June to August of 2025 IHS held 4 in person sessions to receive feedback on the realignment.

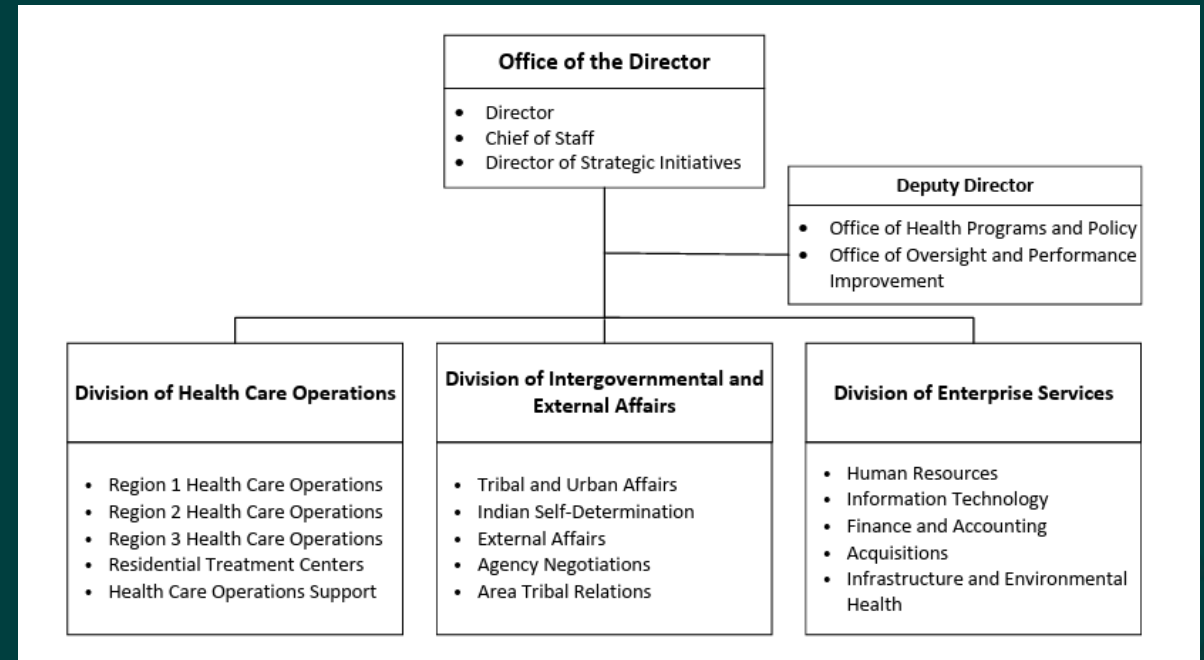
The feedback IHS received from Tribes and Tribal Leaders highlighted the following areas:

- *Staffing inefficiencies & shortages*
- *Concerns regarding equitable funding*
- *Concerns about the consolidation of areas into limited regions*
- *Calls for better collaborative Tribal consultation*

In response to the feedback IHS received, they released a second letter addressing the realignment on December 5, 2025.

# IHS Realignment Continued

In response to the initial listening sessions, IHS released an additional DTLL on December 5, announcing 9 new consultation sessions. These sessions were held between December to January.



**The comment submission deadline is Friday, February 6, 2026.**

email Tribal Consultation comments to: [consultation@ihs.gov](mailto:consultation@ihs.gov)

SUBJECT LINE: IHS Proposed Realignment



# National & Regional Meetings





# National & Regional Meetings

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## **ATNI 2026 Winter Convention**

**Date:** February 2-5,  
2026

**Location:**

Hilton Portland  
Downtown, 921 SW  
Sixth Avenue,  
Portland, OR,  
United States

[Register Here](#)

## **IHS Direct Service TAC**

**Date:** February 9,  
2026

**Location:**

Hubert H.  
Humphrey Building  
200 Independence  
Avenue, S.W.  
Washington D.C.  
DC 20201

## **NCAI**

**Date:** February 9-12,  
2026

**Location:**

Hubert H. Humphrey  
Building  
200 Independence  
Avenue, S.W.  
Washington D.C. DC  
20201

[Register Here](#)

## **CMS Tribal Technical Advisory Board Meeting**

**Date:** February  
17, 2026

**Location:**

[Virtual](#)

# NIHB Upcoming Meetings

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## **2026 NIHB Policy & Legislative Agenda Listening Sessions**

- Listening Session 2 –  
Wednesday, February 4,  
2026, at 10:00 AM PST
- Listening Session 3 – Friday,  
February 6, 2026, at 10:30  
AM PST
- Listening Session 4 –  
Tuesday, February 17, 2026,  
at 11:00 AM PST

## **NIHB Indian Health 101 Webinar – Public Health Authority: Sovereignty in Action**

- Date: February 13,  
2026
- Link: [NIHB Events](#)

# Upcoming Conferences

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## **Tribal Self-Governance Conference**

- Date: April 7-9, 2026
- Location: Gila River Wild Horse Pass Resort & Casino, Chandler, Arizona
- Link: [Event Registration](#)

## **2026 National Tribal Health Conference (NTHC)**

- Date: August 17-21, 2026
- Location: Phoenix, Arizona

# Consultations, Listening Sessions, & Written Comments



# Committee Hearings

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**Hearing:** to examine Title II of the draft of the Native Children's Commission Implementation Act, focusing on justice and safety for native children

**Committee:** Senate Committee on Indian Affairs

**Time:** Wednesday, January 28, 2026, at 11:30 AM PST

[Meeting Link](#)

**Hearing:** to examine a 21st-century VA health care system, focusing on efforts to restructure the Veterans Health Administration

**Committee:** Senate Veterans' Affairs Committee

**Time:** Wednesday, January 28, 2026, at 12:30 PM PST

[Meeting Link](#)





# 2026 February Hill Visits

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## **ID Senators:**

- Senator Mike Crapo
- Senator James E. Risch

**Idaho has 2 congressional members.**

## **OR Senators:**

- Senator Ron Wyden
- Senator Jeff Merkley

**Oregon has 6 congressional members.**

## **WA Senators:**

- Senator Patty Murray
- Senator Maria Cantwell

**Washington has 10 congressional members.**

**During the Winter NCAI meeting in Washington D.C. this February, NPAIHB will be conducting hills visits advocating for our NW Tribes.**

# Policy Resources



# Policy Resources

## Weekly

- Seventh Signal Newsletter
- Thursday Delegate/THD/Policy Staff call

## Monthly

- NPAIHB Legislative and Policy Update at NPAIHB Weekly Update, last Tuesday of the month: Next Update is February 24, 2026

## Quarterly

- Affiliated Tribes of the Northwest Indians
  - Legislative and Policy Update



# Policy Resources

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## **Coalition for Tribal Sovereignty**

NPAIHB is part of the Coalition for Tribal Sovereignty, a collaborative alliance that serves as a powerful unifying voice of regional and national inter-Tribal policy-oriented, non-profit organizations to engage with federal policymakers on critical issues affecting the sovereign interests, rights, and authorities of Tribal Nations,

visit [coalitionfortribalsovereignty.org](https://coalitionfortribalsovereignty.org).



# Contact Us

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Hilary Edwards

***Dir. of Legal & Government Affairs***

(Swinomish Indian Tribal  
Community)

E: [hedwards@npaihb.org](mailto:hedwards@npaihb.org)

P: 971-484-2731



Pakak Sophie Boerner

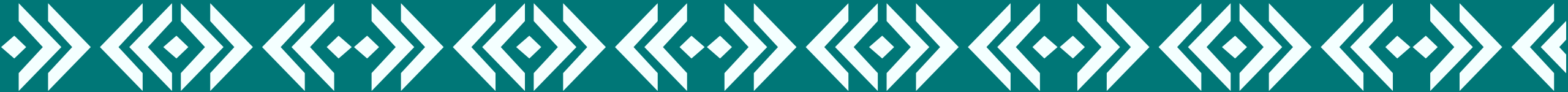
***Health Policy Specialist***

(Iñupiaq, Native Village of Kiana)

E: [psophieboerner@npaihb.org](mailto:psophieboerner@npaihb.org)

**Email policy at: [PolicyTeam@npaihb.org](mailto:PolicyTeam@npaihb.org)**





# Partner Updates

# Portland Area IHS Communicable Diseases Update

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TARA PERTI, MD, MPH  
MEDICAL EPIDEMIOLOGIST  
IHS, PORTLAND AREA OFFICE  
January 27, 2026



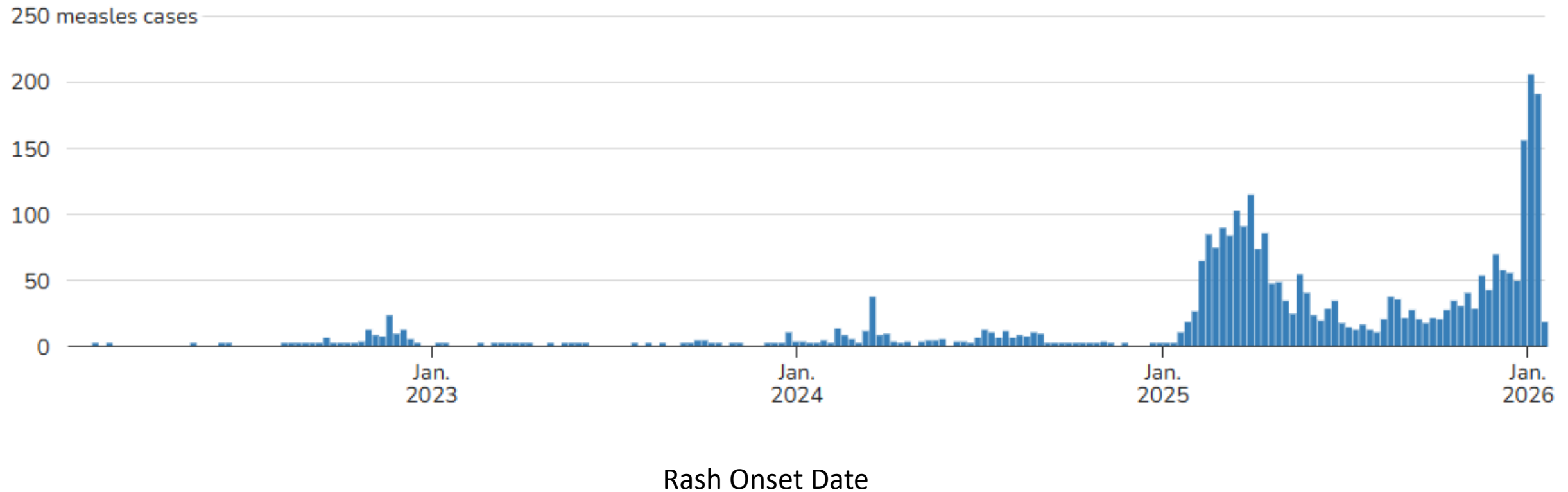
# Outline

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- Measles
- Influenza, RSV, and COVID-19

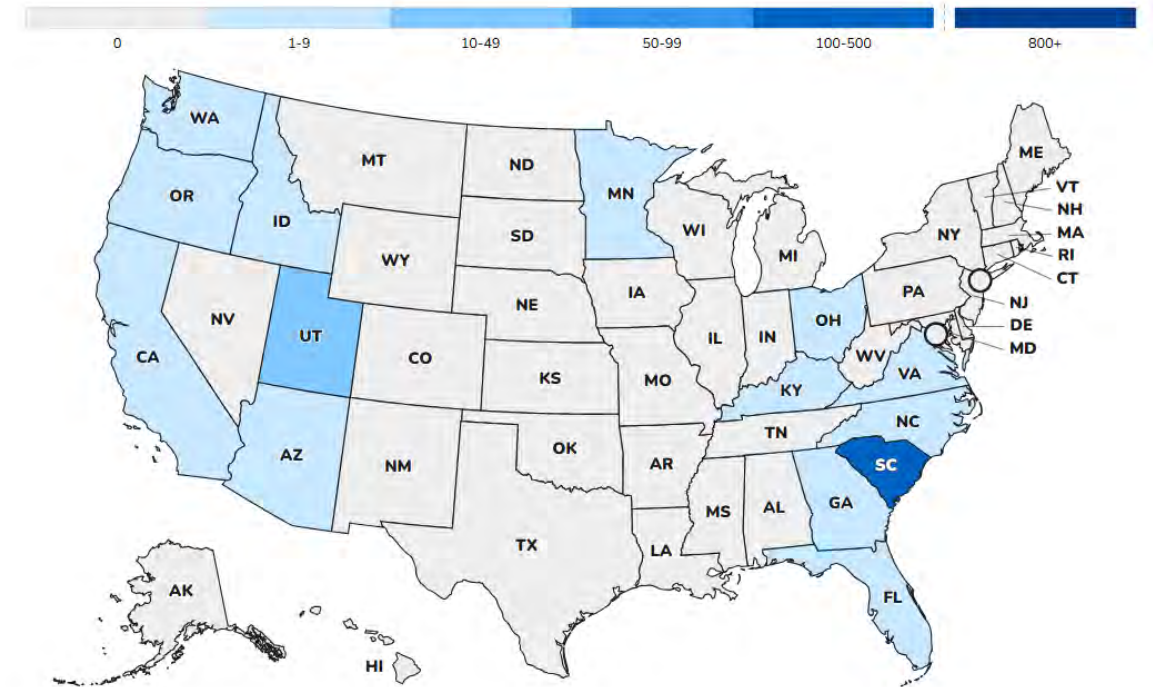
# Measles – United States, 2023-2025 (through 1/22)

2023–2026\* (as of January 22, 2026)



# Measles — United States, 2026

- 416 confirmed cases among 14 states during 2026 as of 1/22 (2,255 cases during 2025).
- 94% of cases from outbreaks that started in 2025 ( $\geq 3$  related cases).
- Age: 25% <5 years-old, 61% 5-19 years-old, 10%  $\geq 20$  years-old.
- 2% hospitalized overall (during 2025, 11% hospitalized, with 18% of those <5 years-old hospitalized).
- 0 deaths (during 2025, 3 deaths among unvaccinated individuals, including 2 healthy school-aged children).
- 94% unvaccinated or with unknown vaccination status, 3% one MMR dose, 3% two MMR doses.





# Measles — Recent Cases in the Portland Area (N=8)

## Idaho (N=6)

- 1/6: Eastern Idaho Public Health reported a cases of measles in an unvaccinated child in **Madison County** who traveled out-of-state to an area with an outbreak. There have been 2 subsequent cases in the County with symptom onset date on 1/11.
- 1/23: Southwest District Health reported 3 cases of measles in **Canyon County**. One child traveled out of state.
  - Possible public exposures: Vallivue Middle School on 1/9/26 and Vallivue High School on 1/20/26.

## Oregon (N=3)

- 1/10: 2 cases of confirmed measles among unvaccinated individuals in **Linn County** with no travel outside Oregon. Possible public exposure locations:
  - Lebanon Community Hospital Emergency Department: 1/6 8:53 PM-1/7 7:00 AM.
  - Albany General Hospital Emergency Department: 1/7 4:59 AM-1/7 8:15 AM
    - Anyone who was at one of these locations should check their immunization records to see if they are protected from measles and to ensure they get vaccinated if not immune.
    - Anyone at one of these locations should monitor for symptoms until 1/28/26. If symptoms develop they should call the clinic or hospital ahead to notify them of the need for evaluation for measles.
- 1/16: **Clackamas County** reported 1 case of confirmed measles in an unvaccinated individual.

# Measles — Recent Cases in the Portland Area (cont.)

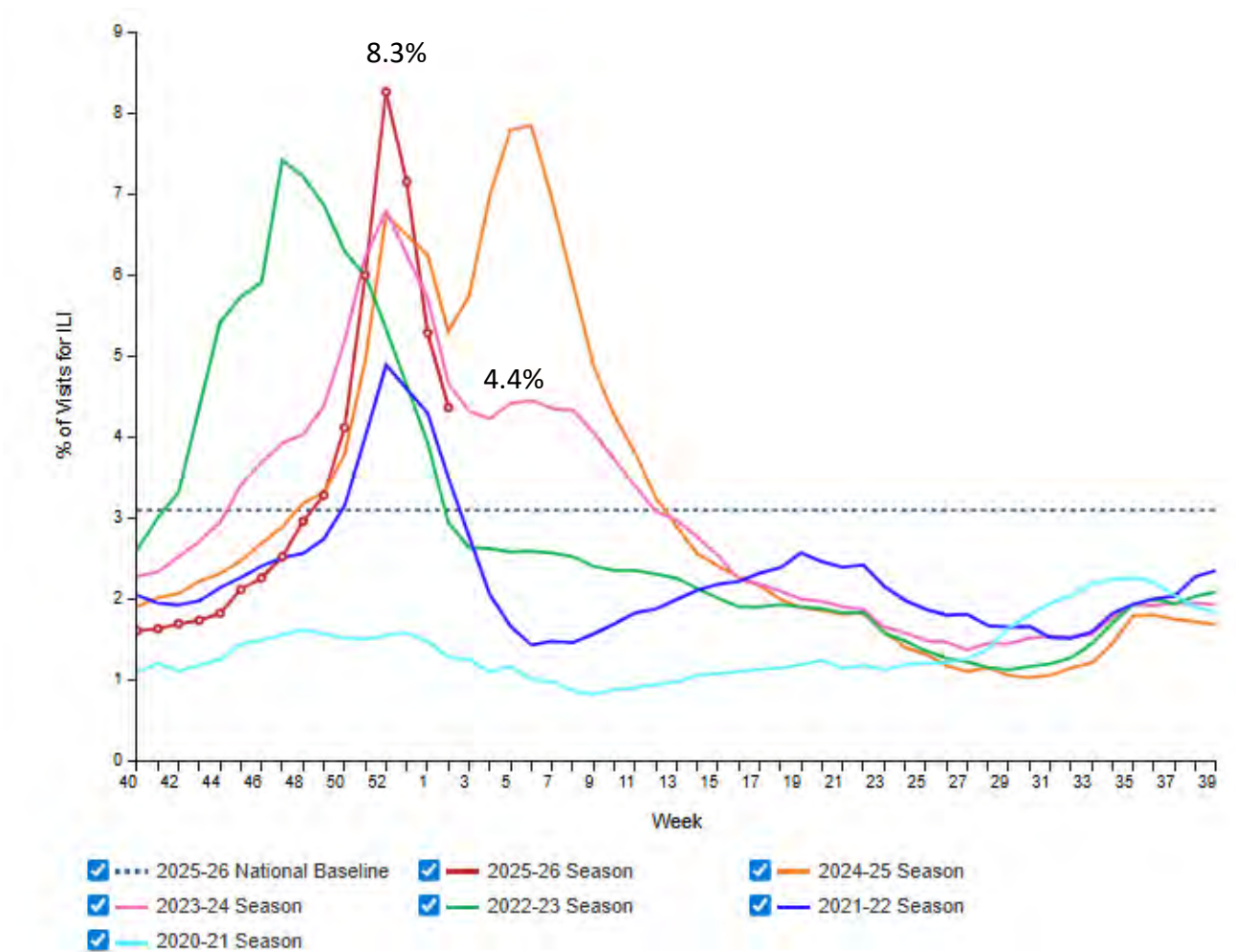
## Washington (N=7)

- Outbreak in Snohomish County with 5 unvaccinated children confirmed to have measles, linked to a family from South Carolina with 3 members diagnosed with measles after traveling in King and Snohomish Counties from 12/27-1/1. Possible public exposure locations:
- **Snohomish County, Washington**
  - 12/27 McDonald's, 530 128th St. SW, Everett
  - 12/28 Slavic Christian Church Awakening, Mukilteo
  - 12/29 Flying Squirrel Trampoline Park, Everett
  - 12/29 Chick-fil-A, 8810 36th Ave, Marysville
  - 12/30 Mukilteo-Clinton Ferry
  - 12/30 Fisherman Jack's, Everett
  - Monitor for symptoms through 1/20/26
- 1/8 Stellar Kids Dentistry Everett
- 1/9 Pathfinder Kindergarten Center (Mukilteo School District), Everett
- 1/9 Serene Lake Elementary School (Mukilteo School District), Edmonds
- Monitor for symptoms through 1/30/26
- 1/13 Swedish Mill Creek, Everett
- Monitor for symptoms through 2/3/26
- **King County, Washington**
  - Sea-Tac Airport and Shuttle to Consolidated Rental Car Facility: 1/1
  - Monitor for symptoms through 1/22/26
- **Additional Details:**  
<https://www.snohd.org/m/NewsFlash/Home/Detail/908>
- 1/15: **Kittitas County** reported a student at Central Washington University confirmed to have measles. Locations of potential exposure to the public on 1/8 and 1/9 at CWU. For additional details: <https://www.co.kittitas.wa.us/press/default.aspx?prID=12119>
- 1/23: **Clark County** reported a confirmed case of measles in an adult who traveled to an area with an outbreak. Possible exposures at Ridgefield High School on 1/14-1/16. <https://clark.wa.gov/public-health/public-health-investigating-confirmed-measles-case-clark-county-1>

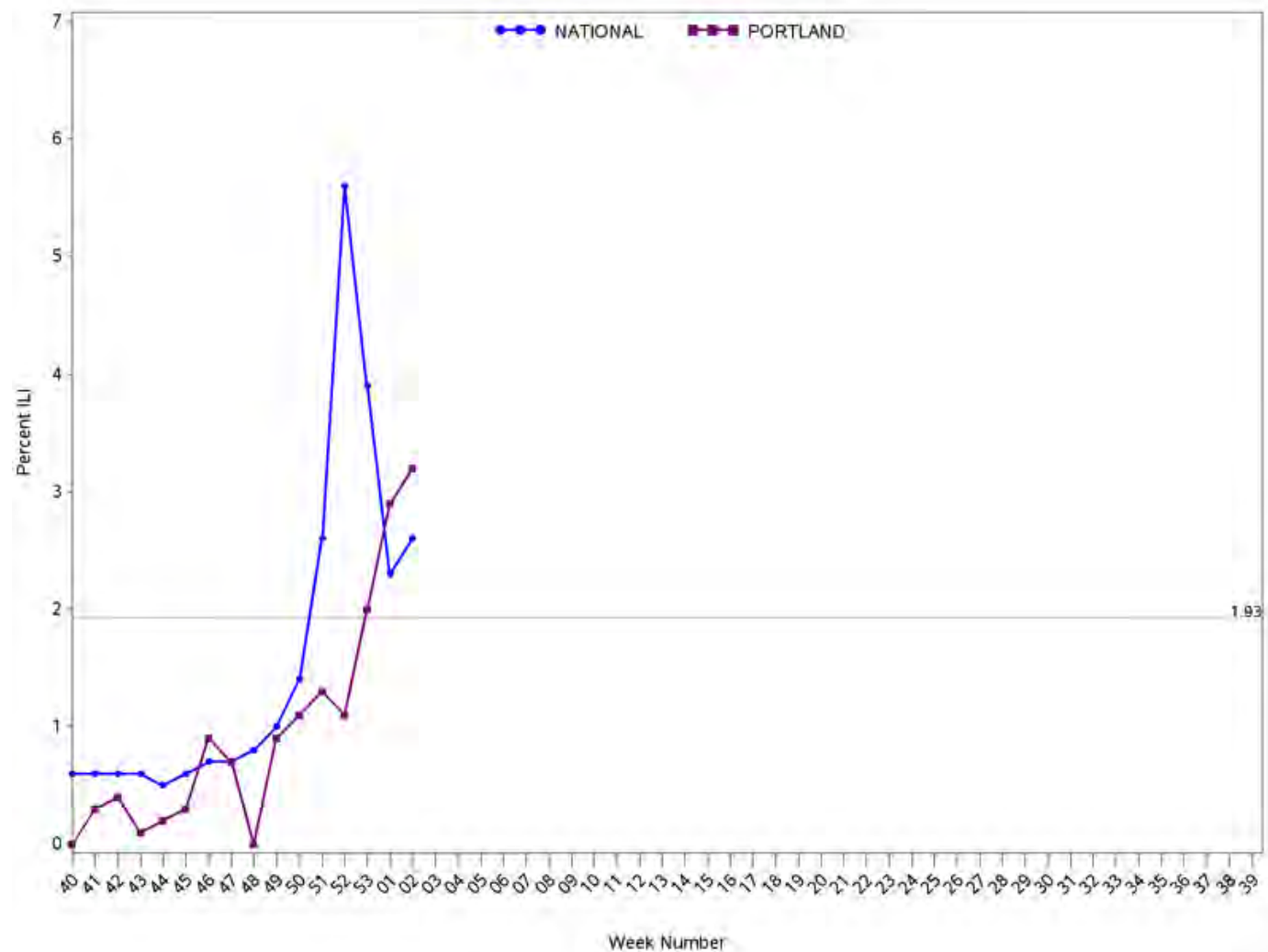
# Measles — Portland Area, 2025-26

Location (State/County)	Number of Cases		Cases Among Travelers
	2025	2026	
<b>Idaho</b>	<b>Total: 13</b>	<b>Total: 6</b>	2 additional cases among travelers to Idaho (Bonneville and Cassia Counties in 2025.
Boundary (Panhandle Health District)	6		
Bonner (Panhandle Health District)	1		
Kootenai (Panhandle Health District)	1		
Bonneville (Eastern Idaho Public Health)	5		
<b>Madison (Eastern Idaho Public Health)</b>		<b>3</b>	
<b>Canyon (Southwest District Health</b>		<b>3</b>	
<b>Washington</b>	<b>Total: 12</b>	<b>Total: 7</b>	9 additional cases among travelers to Washington (King and Snohomish Counties) in 2025.
King	7		
<b>Snohomish</b>	2	<b>5</b>	
Whatcom	2		
Spokane	1		
Kittitas		1	
Clark		1	
<b>Oregon</b>	<b>Total: 1</b>	<b>Total: 3</b>	Measles virus detected in wastewater from Marion and Josephine Counties in October 2025. No cases reported.
Multnomah	1		
Linn		2	
Clackamas		1	

# Percentage of Outpatients Visits for Influenza-like Illness (ILI) — United States, 2025-26 (through 1/17/26)



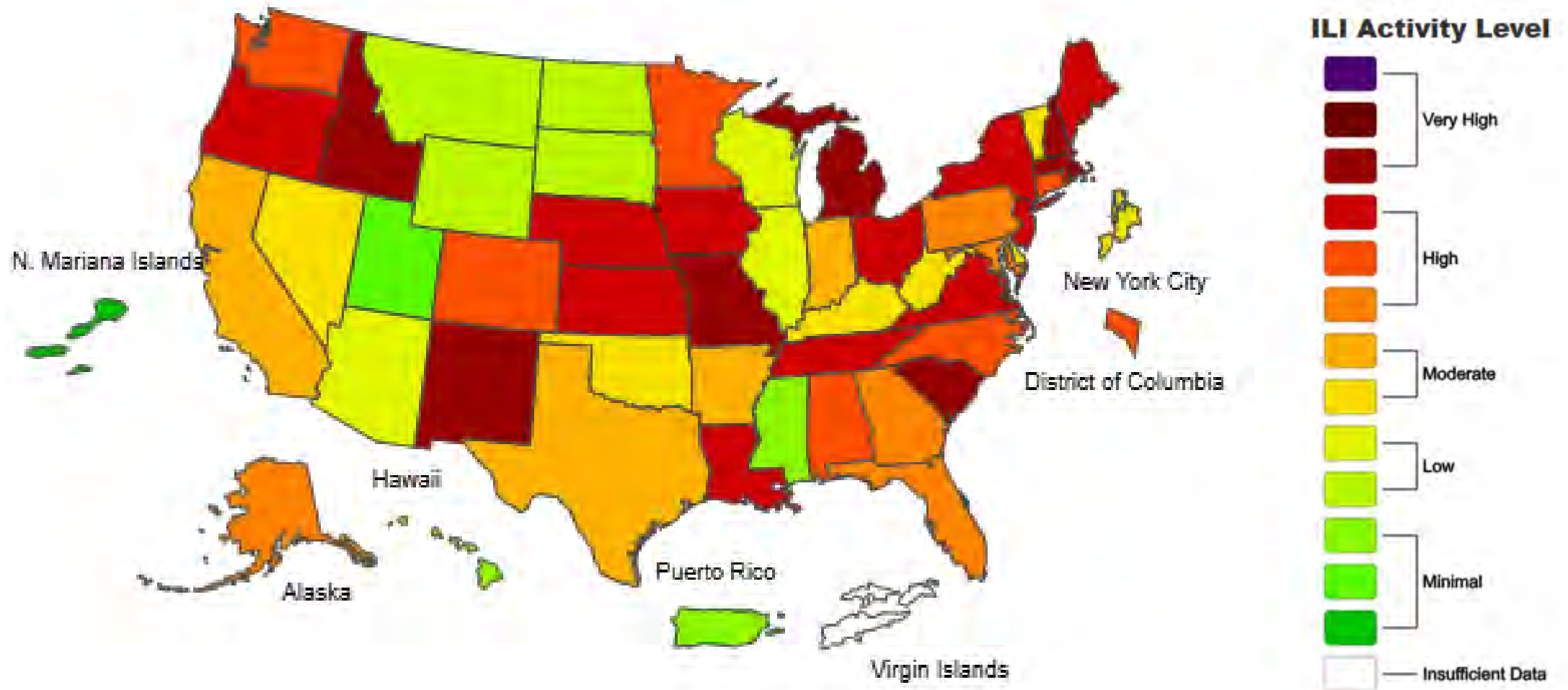
# Percentage of Weekly Outpatient Visits for Influenza-Like Illness (ILI) — IHS (National vs. Portland Area), 2025-26 (through 1/17/26)



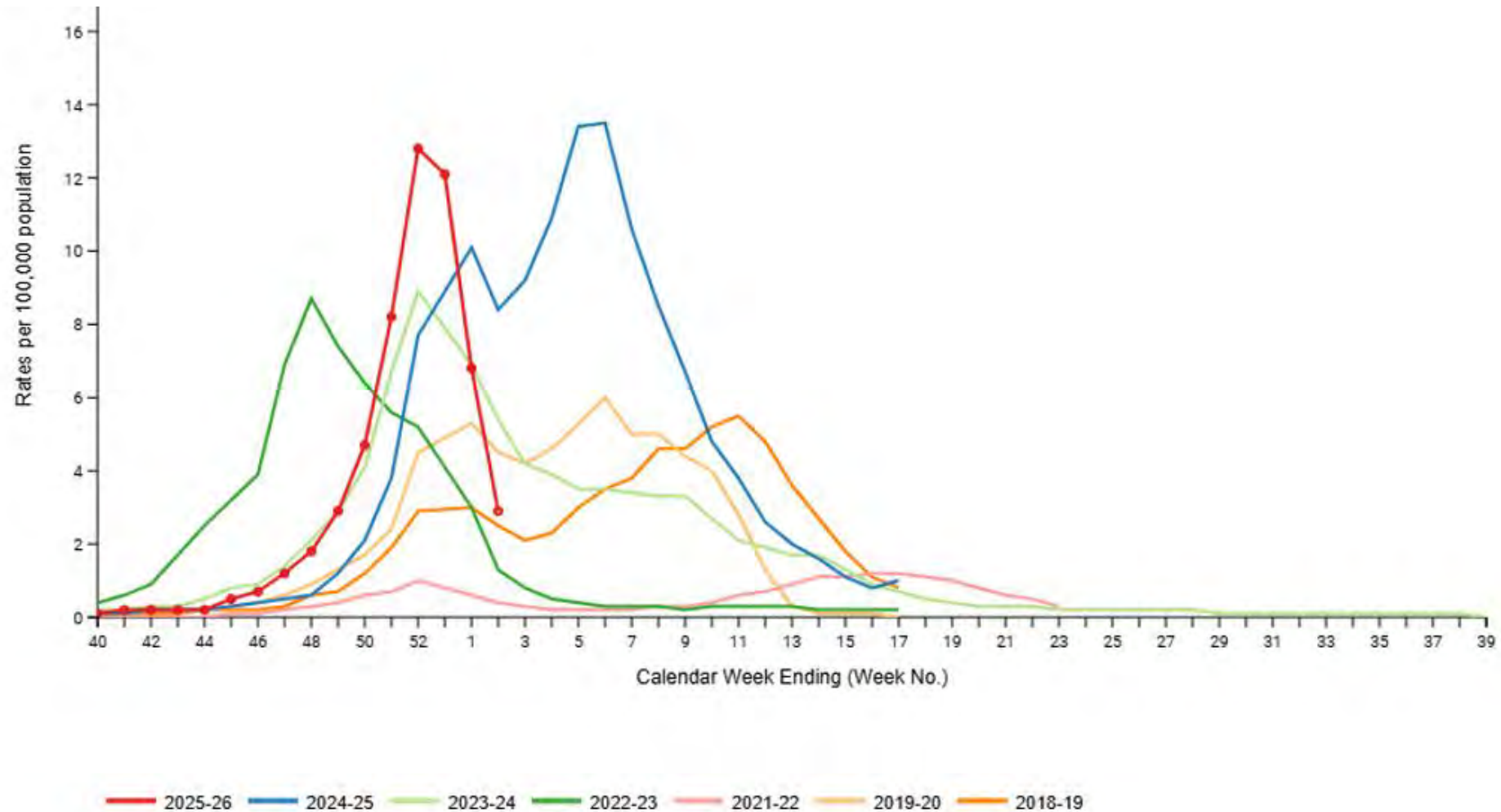
	% ILI Visits	
	Week ending 1/10/26	Week ending 1/17/26
Portland Area*	2.9	3.2
National	2.3	2.6
* Based on 8 reporting I/T/U facilities		



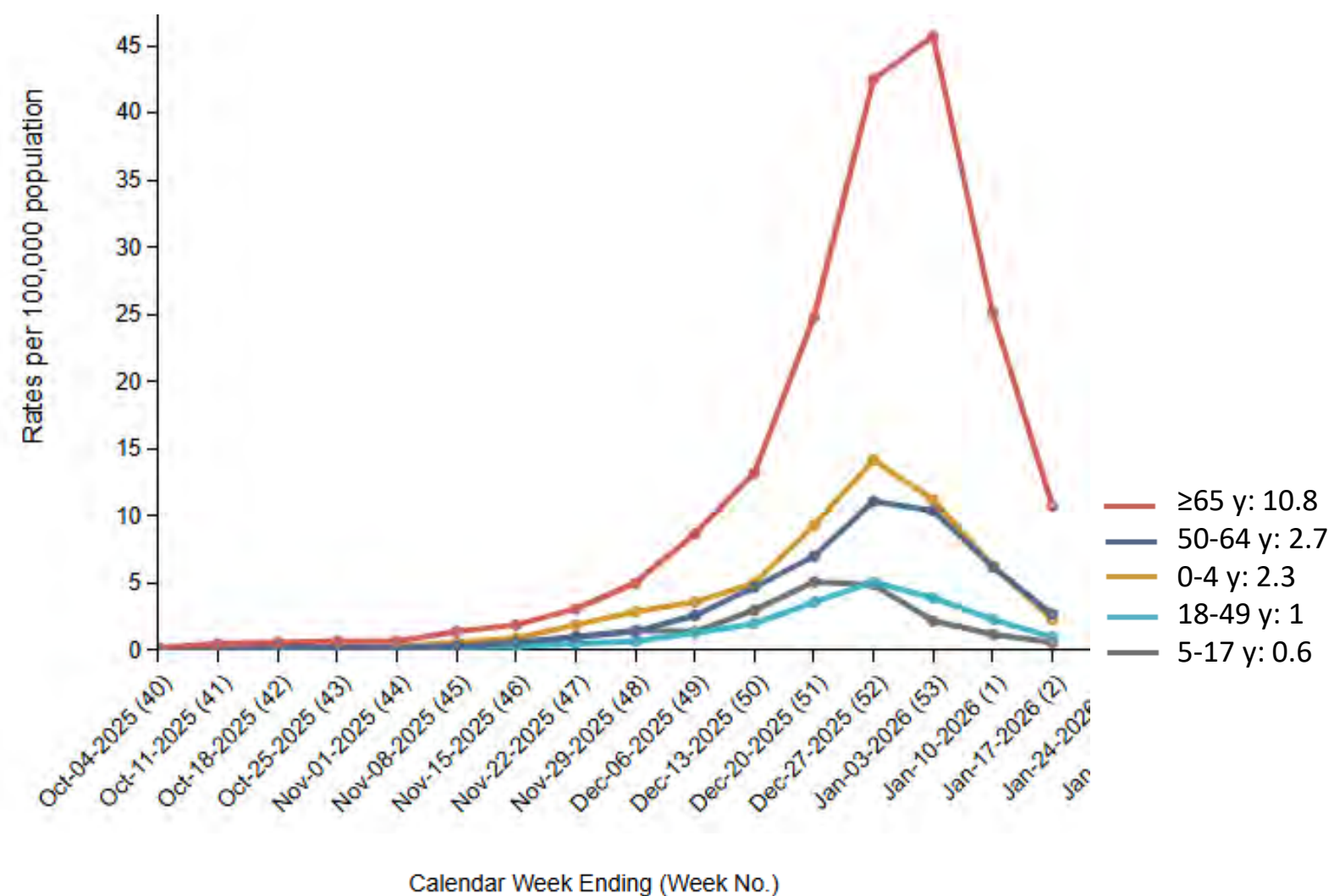
# ILI Activity — United States, 2025-26 (week ending 1/17/26)



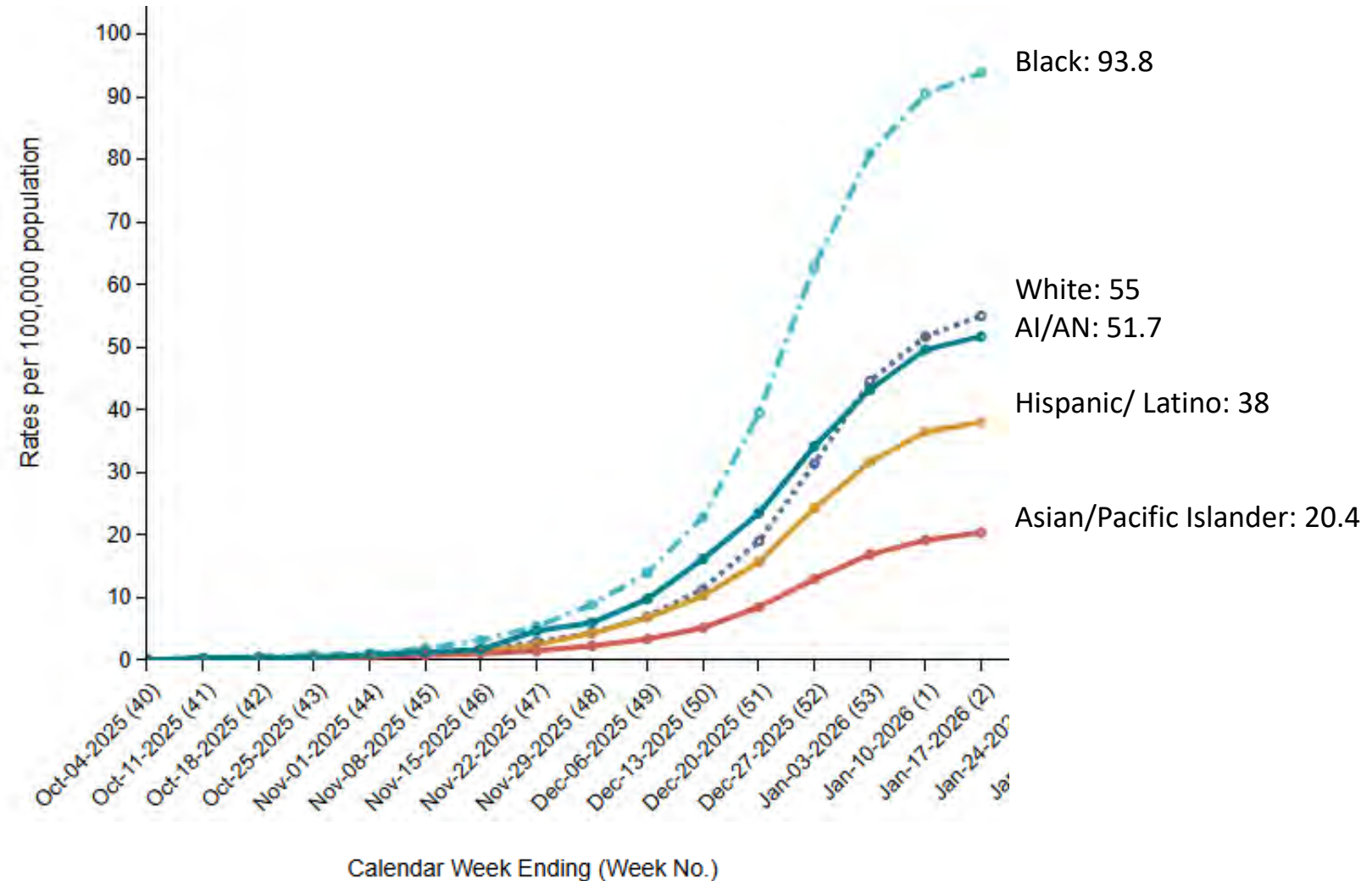
# Weekly Influenza-Associated Hospitalization Rates — United States (FluSurv-Net), 2025-26 and Prior Six Seasons



# Weekly Hospitalizations per 100,000 Persons Associated with Influenza by Age — United States (FluSurv-Net), 2025-26 (through 1/17/26)

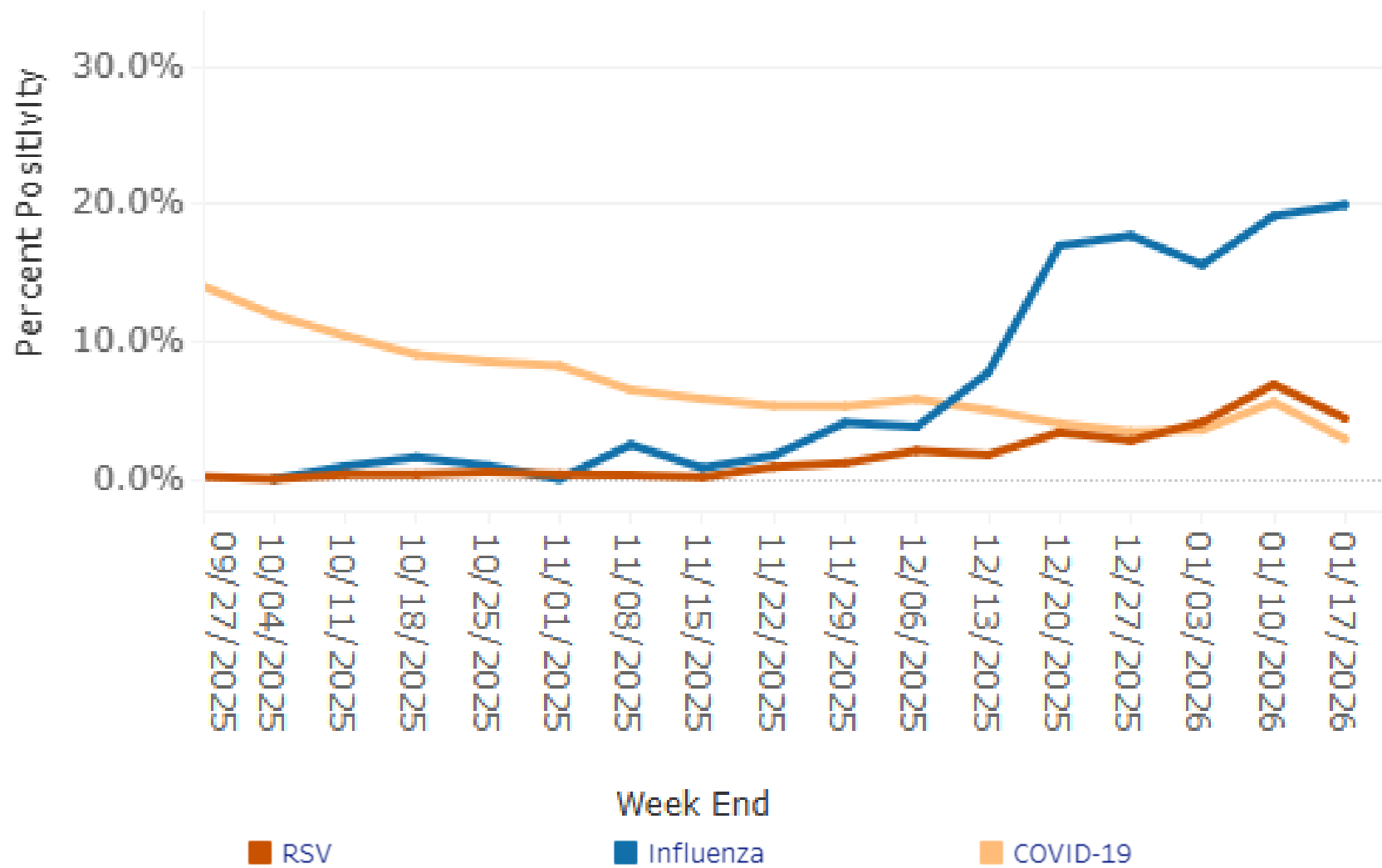


# Cumulative Hospitalizations per 100,000 Persons Associated with Influenza by Race/Ethnicity — United States (FluSurv-Net), 2025-26 (through 1/17/26)



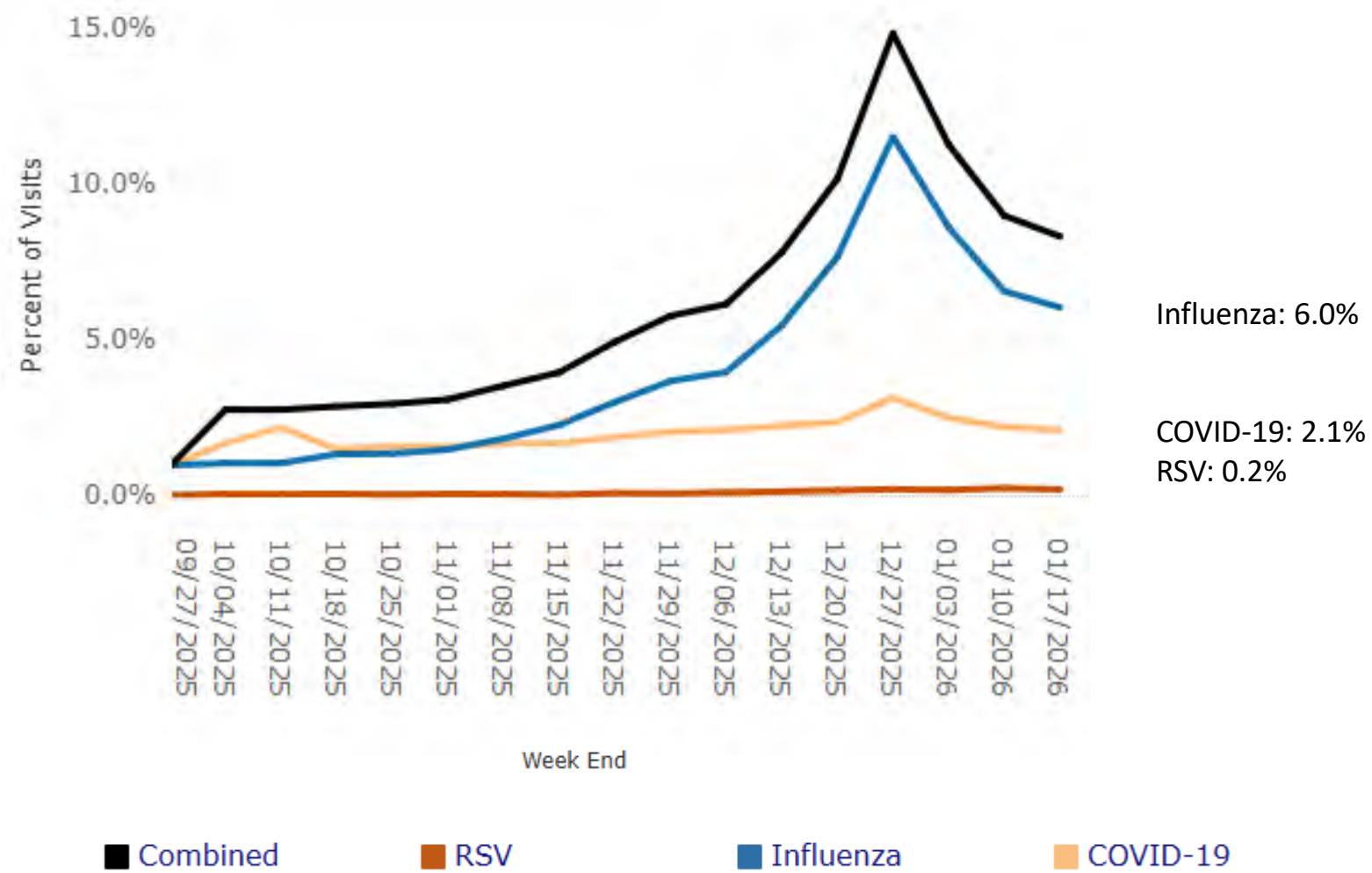


# Percent of Tests Positive for Influenza, RSV, and COVID-19 — Idaho, 2025-26 (through 1/17/26)

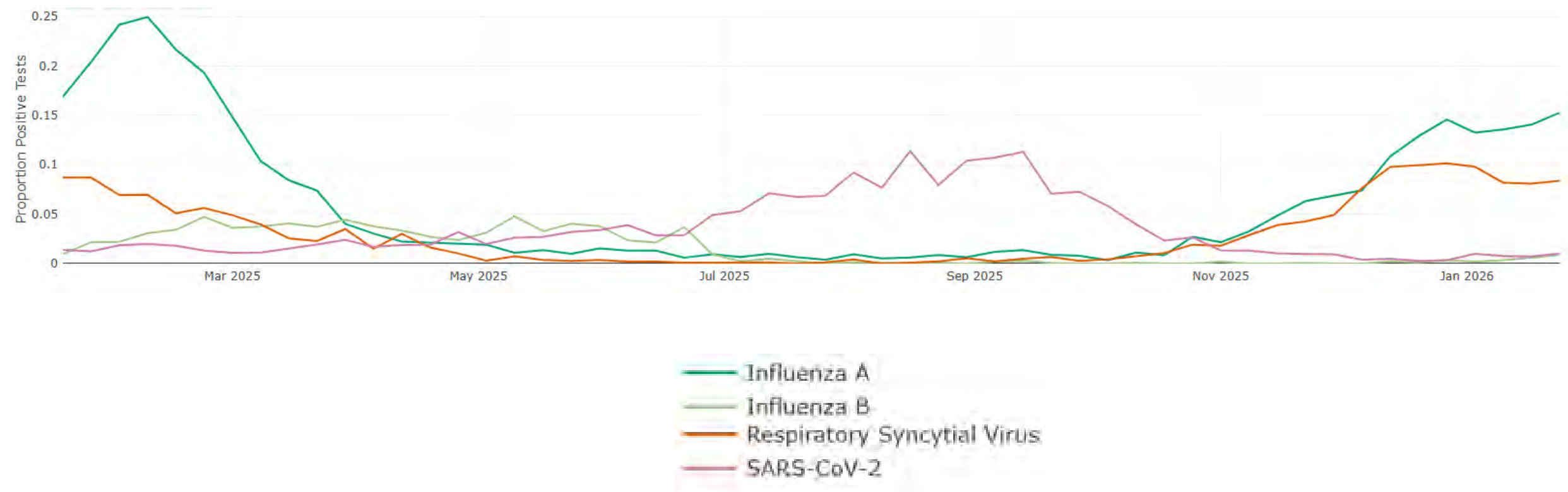




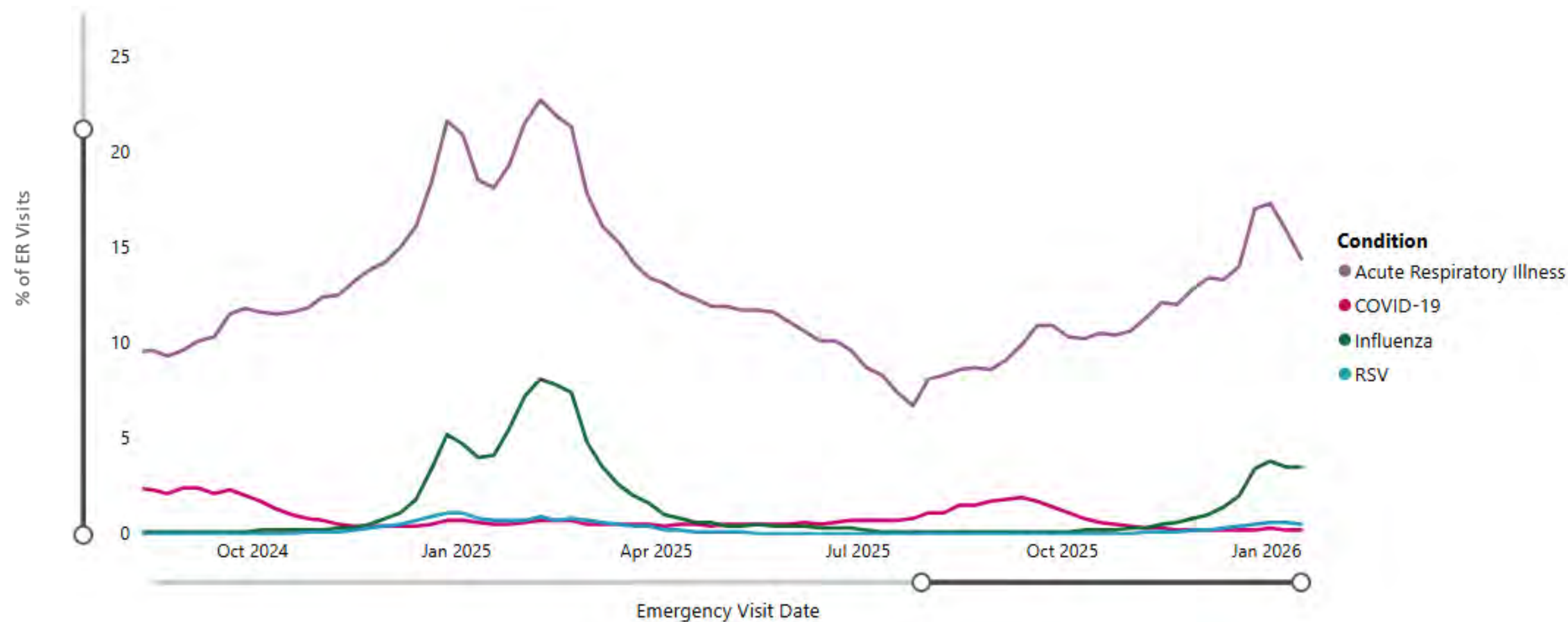
# Percent of Healthcare Visits for Influenza, COVID-19 and RSV — Idaho, 2025-26 (through 1/17/26)



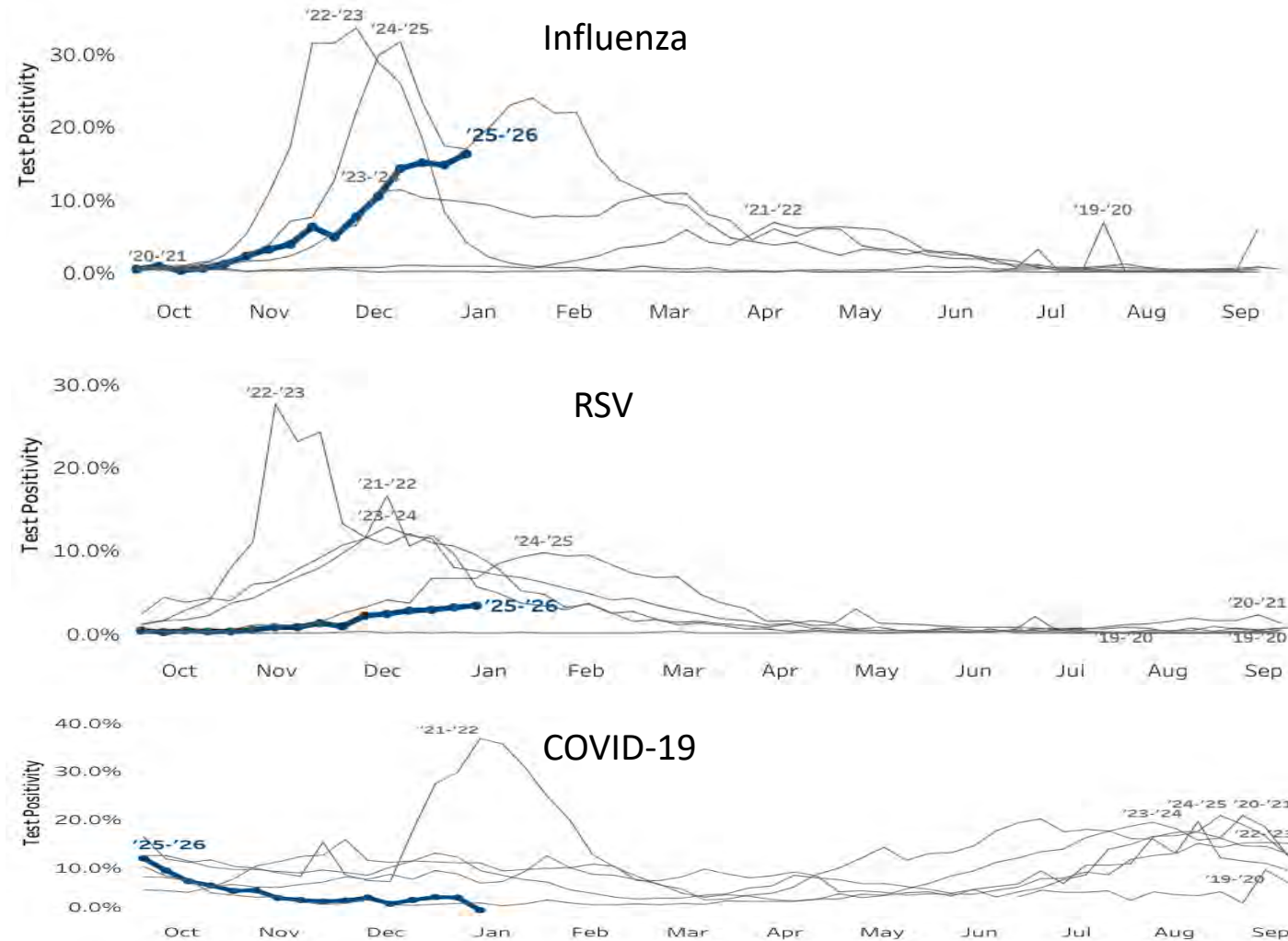
# Proportion of Tests Positive for COVID-19, Influenza and RSV in the Northwest — University of Washington and Seattle Children’s Hospital, 2025-26 (through 1/24)



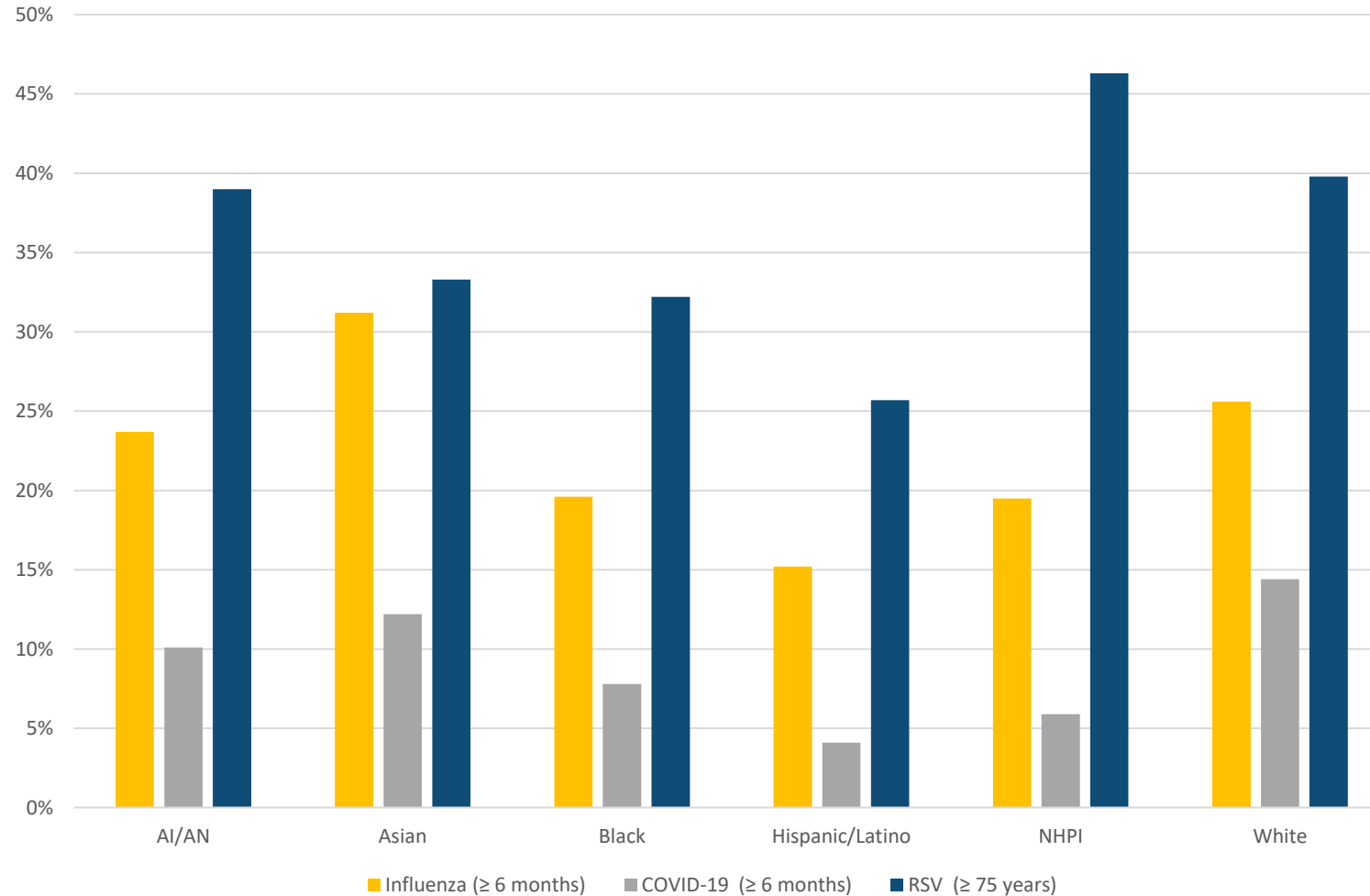
# Percent of Emergency Room Visits for Acute Respiratory Illness, Influenza, RSV, and COVID-19 — Washington, 2024-26 (through 1/17/26)



# Percent of Tests Positive for Influenza, RSV, and COVID-19 — Oregon, 2025-26 (through 1/17/26)



# Percent of People Vaccinated for Influenza, COVID-19 and RSV by Race/Ethnicity — Washington State , 2025-26 (through 1/19/26)





# Summary

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- Measles: Portland Area, 2026
  - Idaho: 3 cases have now been reported in Madison County and 3 cases have been reported in Canyon County.
  - Oregon: 2 cases in Linn County reported 1/10, 1 case in Clackamas County, reported 1/16.
  - Washington: Outbreak in Snohomish County, now with 5 unvaccinated children confirmed to have measles, linked to a family from South Carolina diagnosed with measles after traveling in King and Snohomish Counties from 12/27-1/1. 1 case in Kittitas County (student at CWU) reported 1/15. 1 case in Clark County reported 1/23.
- Influenza
  - Nationally, outpatient visits for influenza-like illness (ILI) peaked during the week ending on 12/27 and has subsequently declined, but this has been continuing to increase for reporting I/T/U facilities in the Portland Area (N=8).
  - Very high ILI activity in Idaho and high activity in Washington and Oregon.
  - Influenza-associated hospitalizations are highest among those 65 years or older, followed by those age 50-64 years-old and those age 0-4 years-old. Hospitalization rates are declining in the U.S.
  - There have been 44 children with influenza-related deaths in the U.S. this season.
  - This year so far, AI/AN have had a cumulative hospitalization rate similar to non-Hispanic whites and lower than non-Hispanic blacks.
- RSV: Remains above threshold for increased activity in WA,OR, ID.
- COVID-19: Low levels of activity currently.
- AI/AN have a higher risk of more severe disease due to influenza, COVID-19, and RSV, yet vaccination coverage is limited [for WA (as of 1/19): Influenza, 23.7%; COVID-19, 10.1%; RSV (age 75+), 39%].



# Recommendations

- Ensure patients at your clinics and your families and communities are up to date on immunizations, including influenza, COVID-19, RSV, and measles so that they are protected and stay healthy. It's still not too late to get vaccinated for influenza, COVID-19 and RSV! Vaccination is recommended as long as there is increased activity of these respiratory viruses. Ensure anyone traveling internationally (e.g. Mexico and Canada) or to a community with an outbreak without presumptive evidence of measles immunity are vaccinated at least 2 weeks prior to travel (those  $\geq 12$  months old: 2 doses at least 28 days apart, infants  $\geq 6$  months old: 1 dose (revaccinated with 2 dose series starting at 12 months)).
- Consider using multiple strategies to increase vaccination rates (e.g. reminder/recall, electronic prompts, standing orders, increasing patient access, provider audit and feedback with benchmarks, CME on provider communication techniques (e.g. boostoregon.org webinars including on motivational interviewing), vaccine clinics, mobile vaccine clinics, reviewing/addressing vaccination status with WIC beneficiaries, messaging utilizing trusted messengers).
- Wash hands regularly, clean high-touch areas frequently.
- What to do when you're sick:
  - Seek health care as soon as possible after developing symptoms (e.g. fevers, body aches, cough, fatigue) as treatment for influenza and COVID-19 are most effective when given early.
  - Stay home and away from other people you live with when you have symptoms of a cold. Wear a mask when you must be around others. You can resume your normal activities when you feel better and have not had a fever for at least 24 hours, but continue to distance from others and wear a mask when around others for the next 5 days.
  - When coughing/sneezing cover your mouth/nose with a tissue or your sleeve and wash your hands afterwards.
- Prepare for measles:
  - Ensure all health care workers have presumptive evidence of measles immunity and that N95 Respirator Fit Testing has been done in the past year.
  - If a measles case is identified in your community:
    - Develop signage and a protocol to screen patients for possible measles (e.g. fever and rash, with international travel, travel to a community with a measles outbreak, or known exposure to measles in the past 21 days).
    - Provide patients with possible measles a mask to wear and to immediately bring back to a designated room available (e.g. airborne infection isolation room if available).
    - Train staff, including front-desk to recognize, isolate, and evaluate patients with possible measles and in infection prevention (e.g. Project Firstline: Measles Infection Control Microlearn with discussion guide).
    - Ensure you have supplies for measles testing.
- Consider measles in anyone with a fever and generalized maculopapular rash with recent international travel or travel to an area with a measles outbreak, or exposure to a measles case. Recommend testing performed in collaboration with local health jurisdiction (throat or NP swab for measles PCR in viral transport media, possibly urine for measles PCR, blood for measles IgM and IgG).

# Patient Education Resources for Respiratory Viruses/Immunizations

IHS Division of Epidemiology and Disease Prevention Educational Resources;

National IHS Public Health Council Public Health Messaging

Northwest Portland Area Indian Health Board (NPAIHB): [VacciNative](#); [Native Boost](#)

Johns Hopkins Center for Indigenous Health. [Knowledge Center: Resource Library](#)

American Academy of Family Physicians. [COVID-19 Vaccine: Fall 2025-26 Immunization Recommendations](#)

American Academy of Pediatrics: [Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement](#). [Recommended Child and Adolescent Immunization Schedule](https://www.aap.org/immunization) <https://www.aap.org/immunization>; <https://www.healthychildren.org/immunizations> (e.g. [COVID-19 What Families Need to Know](#))

American College of Obstetricians and Gynecologists. [COVID-19 Vaccination Considerations for Obstetric–Gynecologic Care](#)

Children’s Hospital of Philadelphia: [Vaccine Education Center](#); [Vaccine and Vaccine Safety-Related Q&A Sheets](#) (e.g. [Q&A COVID-19 Vaccines What You Should Know](#); [Protecting Babies from RSV: What You should Know](#); [RSV & Adults: What You Should Know](#)); [Influenza: What You Should Know](#)).

[Boost Oregon: Videos and Resources](#)

Personal Testimonies: [Families Fighting Flu: Our Stories](#)

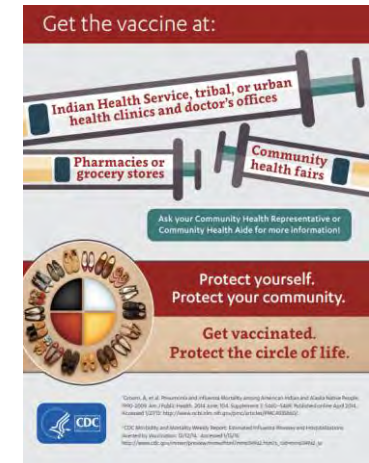
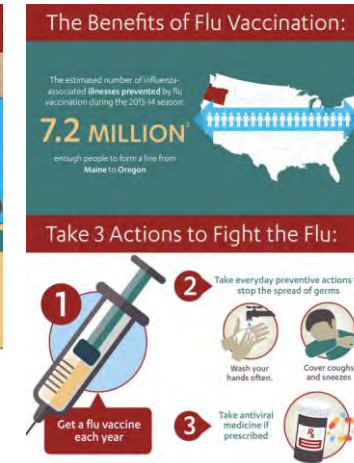
Washington State Department of Health: [Flu Overview](#); [Materials and Resources](#); [Influenza \(Flu\) Information for Public Health and Healthcare](#); [Measles Communications Toolkit for Washington State Partners](#)

[COVID-19](#); [DOH COVID-19 Vaccine Schedule](#); [Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for the Public](#); [West Coast Health Alliance announces vaccine recommendations for COVID-19, flu, and RSV](#) | [Washington State Department of Health](#)

Oregon Health Authority: [Flu Prevention](#); [Immunization Resources](#); [Immunize.org: Influenza \(Flu\)](#)

Idaho Department of Health & Welfare: [Flu \(Seasonal and Pandemic\)](#); [Child and Adolescent Immunization](#) and [Adult Immunization](#); [COVID-19](#)

Centers for Disease Control and Prevention: [Preventing Seasonal Flu](#); [Flu Resources](#); [Preventing Spread of Respiratory Viruses When You're Sick](#)Indian Country ECHO/UNM Project ECHO: [Making a Strong Vaccine Recommendation: Vaccine Communication](#); [RSV](#)



# Additional Resources for Measles

American Academy of Pediatrics. Measles. In: Kimberlin DW, Banerjee R, Barnett ED, Lynfield R, Sawyer MH, Long SS, eds. Red Book: 2024–2027 Report of the Committee on Infectious Diseases. 33rd Edition. Itasca, IL: American Academy of Pediatrics; 2024: 570-585.

American Academy of Pediatrics Project Firstline Poster. Available at: <https://downloads.aap.org/AAP/PDF/ThinkMeasles-final.pdf>

Centers for Disease Control and Prevention. Adult Immunization Schedule by Age. Available at: <https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html>.

Centers for Disease Control and Prevention. Be Ready for Measles Toolkit. Available at: <https://www.cdc.gov/measles/php/toolkit/index.html>

Centers for Disease Control and Prevention. Child and Adolescent Immunization Schedule by Age. Available at: <https://www.cdc.gov/vaccines/hcp/imz-schedules/child-adolescent-age.html>

Centers for Disease Control and Prevention. Guidelines for Environmental Infection Control in Health-Care Facilities. Available at: <https://www.cdc.gov/infection-control/media/pdfs/guideline-environmental-h.pdf>. 2003.

Centers for Disease Control and Prevention. Interim Infection Prevention and Control Recommendations for Measles in Healthcare Settings. Available at: <https://www.cdc.gov/infection-control/hcp/measles/index.html>

Centers for Disease Control and Prevention. Measles. In: Hall E., Wodi A.P., Hamborsky J., et al., eds. Epidemiology and Prevention of Vaccine-Preventable Diseases. 14th ed. Washington, D.C.: Public Health Foundation; 2021. Available at: <https://www.cdc.gov/pinkbook/hcp/table-of-contents/chapter-13-measles.html>

Centers for Disease Control and Prevention. Measles: For Public Health Professionals. Available at: <https://www.cdc.gov/measles/php/guidance/index.html/>

Centers for Disease Control and Prevention. Routine Measles, Mumps, and Rubella Vaccination. Available at: <https://www.cdc.gov/vaccines/vpd/mmr/hcp/recommendations.html#hcp>

Centers for Disease Control and Prevention. Questions About Measles. Available at: <https://www.cdc.gov/measles/about/questions.html>

Filardo TD, Mathis A, Raines K, et al. Measles. In: Roush SW, Baldy LM, Mulroy J, eds. Manual for the Surveillance of Vaccine Preventable Diseases. Atlanta, GA: Centers for Disease Control and Prevention. Paged last reviewed:05/13/2019. Available at: [https://www.cdc.gov/surv-manual/php/table-of-contents/chapter-7-measles.html?CDC\\_AAref\\_Val=https://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html](https://www.cdc.gov/surv-manual/php/table-of-contents/chapter-7-measles.html?CDC_AAref_Val=https://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html)

Idaho Bureau of Laboratories. Clinical Specimen Submission Guide. Available at: <https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=31429&dbid=0&repo=PUBLIC-DOCUMENTS>

Johns Hopkins Bloomberg School of Public Health: Center for Outbreak Response and Innovation. Empowering Outbreak Response: Optimizing Strategies for Measles Outbreaks. Available at: <https://cori.centerforhealthsecurity.org/resources/measles-outbreak-response>

Oregon Health Authority. Measles / Rubeola (vaccine-preventable). Available at: <https://www.oregon.gov/oha/ph/diseasesconditions/diseasesaz/pages/measles.aspx>


Oregon State Public Health Laboratory. Measles (Rubeola), Real-Time RT-PCR. Available at: <https://www.oregon.gov/oha/PH/LABORATORYSERVICES/Pages/zMeaslesPCR.aspx>

Washington State Department of Health. Measles. Available at: <https://doh.wa.gov/you-and-your-family/illness-and-disease-z/measles>; <https://doh.wa.gov/public-health-provider-resources/notifiable-conditions/measles>

Washington State Department of Health Public Health Laboratory. Measles, Mumps, & Rubella Specimen Testing Protocol. Available at: <https://doh.wa.gov/sites/default/files/2025-06/420-260-WA-PHL-MMRSpecimenTestingProtocol.pdf>; Measles Specimen Shipping Guide. Available at: <https://www.medialab.com/dv/dl.aspx?d=1932777&dh=3b5fa&u=69790&uh=0e2a1>



# Examples of Patient Education Resources from the Northwest Portland Area Indian Health Board (NPAIHB)



Vaccination information for Natives by Natives

## COVID-19 Vaccine

We have many ways to optimize our health and improve our lives. Vaccines are just one way we can protect ourselves from serious illnesses, like COVID-19 and the impacts of long COVID.

This handout is designed to help you understand COVID-19 and COVID-19 vaccines, so you can take care of yourself, your family, and your community.

“As a Crow Tribal member, we did lose a lot of Elderly during the COVID pandemic, especially before vaccines... Now, we are social gathering, and we are lost without these Elders... When we get vaccinated, we are protecting our Elderly and our culture. We have to protect our people. And vaccines do help with that. Even if your body is strong and healthy, it's still important to get vaccinated.”

— Lana Schandee, Elder and Crow Tribal Member

### Common COVID-19 Symptoms

COVID-19 is a virus that attacks your whole body and causes some or all of these:

- Fever
- Cough
- Loss of taste and smell
- Headaches
- Shortness of breath
- Sore throat
- Congestion
- Sore throat

COVID-19 can also result in hospitalization and death, especially for those more vulnerable, like people with certain medical conditions and Elders. It can also result in a range of ongoing health problems – including long COVID – that can last weeks, months, or even years.

### How COVID-19 Spreads

COVID-19 spreads through droplets in the air when a person with the virus coughs, sneezes, speaks, sings, or breathes. It can also spread through objects someone with the virus touches, sneezes, or coughs on. The virus can enter your body when you touch these objects and then touch your mouth, nose, or eyes.

### How to Protect Yourself

To be fully vaccinated against COVID-19, you need to complete the vaccine series and get boosted. For most people, the vaccine series consists of two shots. You get the first shot, then the second one about 25 days later. Five months after completing the vaccine series, you get boosted. We may also need additional boosters after that. Why? Booster shots contain the most up-to-date instructions for fighting against the latest versions of COVID-19.

### How the Shots Work

Within our bodies, each of us has warrior cells that stand guard and attack diseases. When we get the COVID-19 shots, the ingredients tell our warrior cells how to recognize and fight COVID-19. That's why if you get the COVID-19 vaccine series and get boosted, you are less likely to get sick with COVID-19. It can also reduce the seriousness of illness if you happen to get sick.

### Shot Side Effects

You may experience side effects from the COVID-19 shots. This does not mean you are getting sick with COVID-19. Most side effects are mild and go away within a few days. Mild side effects are a good sign that your warrior cells are preparing to recognize and fight COVID-19.

Common side effects of the COVID-19 shots include:

- Soreness, redness, or swelling where you got the shot
- Fatigue
- Muscle aches
- Headache
- Fever

### Shot Safety

Millions of Americans have safely received the COVID-19 shots. This includes American Indians and Alaska Natives. Like all vaccines in the U.S., the COVID-19 shots are monitored for safety.

### Who Should Get Vaccinated

Generally, anyone 6 months and older should get vaccinated against COVID-19, including pregnant people. For more information, talk to your provider.

### Where to Get Vaccinated

To get vaccinated contact your local Tribal clinic, IHS facility, or visit a local pharmacy or clinic.

### Vaccinative

This handout was developed by Vaccinative – a project dedicated to creating accurate vaccine information for Native people by Native people. We do this by gathering info from trusted Elders, Native health professionals, and other experts.

All of our materials are reviewed by the Vaccinative Alliance, a collaboration of staff from Tribal Epidemiology Centers across the nation.

### Additional Information

For additional information, including info on long COVID, check out [www.IndianCountryCHO.org/Vaccinative](http://www.IndianCountryCHO.org/Vaccinative). For questions, contact us at [Vaccinative@npsihb.org](mailto:Vaccinative@npsihb.org).

“We work together, using modern and traditional medicines to help keep our tribe safe from COVID-19. I got vaccinated to protect my family, my tribe, and I from COVID-19. COVID vaccines are safe, and the benefits of getting a COVID vaccine outweigh the risk of getting COVID-19 infection.”

— Dr. Frank Anishewski, M.D. (LTS), Elderly Clinician, LTPIB Eastern Interior Tribal Clinic, medical Director and Treaty Medicine Physician



Vaccination information for Natives by Natives

## Vaccines When You Are Pregnant or Breast/Chestfeeding

Pregnancy and parenthood are sacred times when we make plans to care for ourselves and our babies. Part of this preparation includes keeping up to date on our vaccines.

While getting vaccinated is always something to discuss with your health provider, there are some important things to consider if you are pregnant or breast/chestfeeding.

### How Vaccines Work

Within our bodies, each of us has warrior cells that stand guard and attack diseases. Vaccines help our warrior cells see and fight disease. For example, when we get the flu shot, the ingredients in the shot tell our warrior cells how to recognize and fight the flu. That's why if you get a flu shot, you are less likely to get sick with the flu. Getting vaccinated can also reduce the seriousness of illness if you happen to get sick.

### Vaccines Protect You and Baby During Pregnancy

When you get vaccinated during pregnancy and your warrior cells learn to recognize and fight a particular illness, this information gets shared with your unborn baby. However, the protection offered to your baby starts to fade in the weeks and months after birth. That's why it's important to talk with your health provider about what vaccines both you and your newborn need to stay healthy.

### Vaccines to Get When You're Pregnant

Several vaccines are recommended for pregnant people. These include:

- Tdap (whooping cough) vaccine
- Flu vaccine
- COVID-19 vaccine

Depending on your history, you and your doctor may decide that you need additional vaccines.

“As a new parent, I know that I'm not only responsible for my health, but for my baby's health too. Making sure our whole family is up to date on our vaccines gives me peace of mind that we are all doing what we can to stay healthy. I also feel like I am honoring our ancestors who did not always have access to these medicines.”

— Tame Eagle Staff, Muscogean & Ojibwa Lakota, Northern Anishinabe, and Northern Cheyenne, Project Manager at the Northwest Portland Area Indian Health Board



Vaccination information for Natives by Natives

## Vaccines and Breast/Chestfeeding

Breast/chestfeeding is one of the best ways to nourish, comfort, and connect with your baby. When you are vaccinated, breast/chestfeeding can also help you pass on important instructions for recognizing and fighting serious illnesses, like COVID-19. Likewise, getting vaccinated as a new parent makes it less likely that you will get sick and make your baby sick.

Talk with your health provider to learn what specific vaccines are recommended for you while you are breast/chestfeeding.

### The Choice is Yours

As you think about getting vaccinated, read up and bring any questions or concerns you have to your health provider. They can talk with you and help explain why certain vaccines are safe and effective and which vaccines you may want to temporarily avoid. They will also share other tools to keep you and your family healthy.

### Where to Get Vaccinated

To get vaccinated contact your local Tribal clinic, IHS facility, or visit a local pharmacy or clinic.


### Vaccinative

This handout was developed by Vaccinative – a campaign dedicated to creating accurate vaccine information for Native people by Native people. We do this by gathering info from trusted Elders, Native health professionals, and other experts.

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### Additional Information

For additional information, check out [www.IndianCountryCHO.org/Vaccinative](http://www.IndianCountryCHO.org/Vaccinative). For questions, contact us at [Vaccinative@npsihb.org](mailto:Vaccinative@npsihb.org).



## Protecting Your Kids from Respiratory Illnesses

Respiratory illnesses  
Respiratory illnesses – like whooping cough, pneumonia, flu, RSV, and COVID-19 – can be extremely dangerous for kids.

### Who Should Get Vaccinated

Whooping Cough (DTPa/DTP)	Infants 2 mos, 4 mos, and 6 mos. AND kids 4 yrs old and 4-6 years old
Pneumonia	Infants 2 mos, 4 mos, and 6 mos. AND kids 2 yrs old and 4-6 years old
RSV	Infants less than 6 mos. old AND kids 8 years old
COVID & Flu	Everyone 6 mos. and older every year

### Why Buggy Bats?

COVID and flu quickly change from their look. We need updated vaccines, so our bodies know how to fight these diseases.


### Vaccines are Safe

Series and boosters are safe. People are more likely to get sick by ignoring plans than by someone taking a vaccine to stay healthy.

### Don't Have Regrets

The pros of kids getting vaccinated far outweigh the cons. Missing vaccines puts your child in and others at risk for serious illnesses.

Learn more  
[www.IndianCountryCHO.org/Respiratory](http://www.IndianCountryCHO.org/Respiratory)



<https://www.indiancountryecho.org/vaccinative/>  
<https://www.indiancountryecho.org/native-boost/>



# Flyer and Social Media Posts from IHS



## Protect the Ones We Love.

The MMR vaccine can prevent measles, mumps and rubella. Nearly all people who get the MMR vaccine are protected for life.

### The MMR Vaccine

**What is Measles?**  
Measles causes high fever, cough, runny nose, and watery, red eyes, followed by a rash. Measles spreads easily and can cause hospitalization, pneumonia, and death.

**What is Mumps?**  
Mumps causes fever, muscle aches, tiredness, and swelling of the saliva glands in the cheek and jaw. Mumps can cause arthritis, ovary or testicle swelling, deafness, brain swelling, and, rarely, death.

**What is Rubella?**  
Rubella may cause mild fever, sore throat, headache, and a rash. Some people have no symptoms, and women may have joint pain. Rubella is very dangerous for unborn babies and can cause miscarriage or birth defects.

**Who Can Get Vaccinated?**  
Children need two doses of the MMR vaccine:

- First dose: 12-15 months of age
- Second dose: 4-6 years of age

Most adults need 1 or 2 doses of MMR vaccine in a lifetime, depending on risk factors.





All individuals should consult with their health care providers to understand their options to get the MMR vaccine.

Scan code for more information.





## Protect the Ones We Love.

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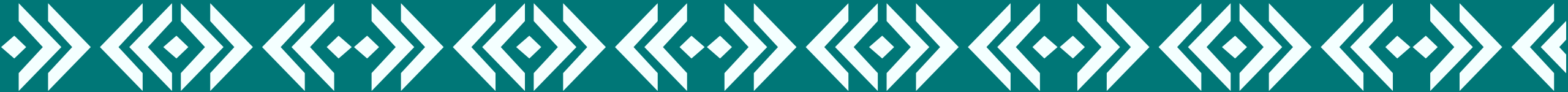
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# Questions & Comments