

Department of Health and Human Services Secretary's Tribal Advisory Committee Meeting

March 2, 2011 - Washington, DC

Executive Summary

The Secretary's Tribal Advisory Committee (STAC) Meeting was held on March 2, 2011, in Washington, DC. The meeting opened with STAC Chairman Ken Lucero, Tribal Council Representative, Pueblo of Zia, welcoming the group and calling for the opening Tribal prayer.

Laura Petrou, Chief of Staff to Secretary Sebelius, provided opening remarks, reminding the committee members that they were brought together because of their respective expertise and commitment to helping the Secretary and the U.S. Department of Health and Human Services (HHS) make the Department's efforts to serve Indian people more effective and efficient. Chairman Lucero also provided opening remarks, commenting on recent activities occurring in Washington, DC; and he emphasized the importance of lobbying for Tribal nations, continued support for direct funding to Tribes, and the need to stop states from inserting themselves into the Tribal-to-Federal government relationship.

Norris Cochran, Deputy Assistant Secretary for Budget, Assistant Secretary for Financial Resources, provided the STAC with updates on the FY 2011 and FY 2012 budgets. Specifically, he addressed the current continuing resolution extension, reviewed highlights for the Indian Health Service (IHS), provided budget charts that tracked program activities for American Indians and Alaska Natives (AI/ANs), and noted key budget initiatives. Mr. Cochran also mentioned that thought was already being given to the FY 2013 budget, stating that consultation discussions would be important drivers to the budget recommendations.

Kathleen Sebelius, HHS Secretary, temporarily joined the meeting to thank the STAC for its work. She told the group that she would stress the importance of programs in Indian Country when she discussed the HHS budget on Capitol Hill.

After meeting participants introduced themselves, Paul Dioguardi, Director, Office of Intergovernmental Affairs, reviewed the agenda for the STAC meeting. He commented that the agenda reflected topics and priorities as presented by the STAC. He also noted that priorities of the Intradepartmental Council on Native American Affairs (ICNAA) were being aligned with those of the STAC.

Patricia Mantoan, Attorney, General Law Division, Office of the General Counsel, provided the STAC with an overview of the Federal Advisory Committee Act (FACA). She informed the STAC that it was not covered by the Act, as it fell under one of the exemption clauses. As part of her presentation Ms. Mantoan reviewed frequently asked questions (FAQs) regarding the Act, explaining that there was no legal requirement to make the STAC meetings public.

The STAC heard updates from various Tribal Advisory Committees, namely the Substance Abuse and Mental Health Services Administration Tribal Technical Advisory Committee (SAMHSA TTAC); the Centers for Medicare and Medicaid Services Tribal Technical Advisory Group (CMS TTAG); the Health Research Advisory Council (HRAC); and the Centers for Disease Control and Prevention Tribal Consultation Advisory Committee (CDC TCAC). The updates included information on the committees' purpose, composition, meeting schedules, and activities.

Following the committee updates, a motion was made and passed to move into the "Executive" portion of the meeting. All non-members were asked to leave the room.

Lillian Sparks, Chair, ICNAA, led the presentation to the STAC on updates from the ICNAA, noting that the group met on a regular basis to inform the Department on Tribal activities and to form strategies for cross agency collaborations. She, along with her fellow committee members, provided information and highlights on each of the ICNAA's subgroups: 1) Access and Availability; 2) Outreach and Technical Assistance; 3) Tribal Eligibility for Grants; and 4) Expansion of Services and Pilot Development (Self-governance Expansion, Tribal/State Relations).

The STAC was asked to send all comments and suggestions for all the subgroups to Stacey Ecoffey, Principal Advisor for Tribal Affairs, Office of Intergovernmental Affairs, at Stacey.Ecoffey@hhs.gov by Monday, March 14, 2011. There was a general sentiment among the STAC that the projects presented were worthwhile efforts.

Ms. Ecoffey stated that there were some core functions that the STAC needed to address, e.g., communications, charter, working with technical advisors, putting STAC information on the Tribal website, and developing information. She also suggested that the group consider a quarterly national conference call and/or providing updates via regional area quarterly calls. Mr. McGhee suggested that the group also needed to address the format and the process STAC meetings would follow.

The STAC discussed the idea of forming subcommittees, noting that it needed to respond to the ICNAA's request for feedback, create bylaws/charter, develop a communications plan regarding what information to share and how to share it, decide if Federal STAC members vote on issues, and address issues concerning representation at the meeting. After hearing various opinions on how to proceed, a motion was made and passed to conclude the Executive session in order to vote on the issue of creating subcommittees. A motion was also made and passed to have the technical advisors (Federal and Tribal) draft the bylaws, provide feedback to the ICNAA, and propose applicable subcommittees to the STAC. Ms. Ecoffey said she would distribute the minutes from the meeting to the STAC, as well as redistribute the schedule of the STAC's quarterly conference calls.

For the last session of the day, Ms. Ecoffey directed the group's attention to the quarterly report that went out to Tribes on the Affordable Care Act (ACA) in the meeting packet; and she mentioned that the next report would go out at the end of April. Noting that the ACA was a high level issue, Ms. Ecoffey emphasized the importance of communicating with Tribes. To that end,

she indicated that monthly calls were being held concerning the ACA and a bulletin distributed on a weekly basis. Ms. Ecoffey also shared that internal teams at HHS would each be working on specific portions of the ACA; and she reiterated the Department's commitment to having consultations with Tribes. Dr. Roubideaux added that HHS was taking a lead on the ACA, of which the Indian Healthcare Improvement Act (IHICIA) was a part, and she said she hoped the STAC would make recommendations on how to proceed with implementation.

Mayra E. Alvarez, Director of Public Health Policy, Office of Health Reform, echoed Dr. Roubideaux's remarks, and proceeded to share current and upcoming benefits of the ACA—clarifying that current programs were being used as bridges until the full implementation took effect in 2014. She directed the group to the website <http://www.healthcare.gov> for a sample of what the new system would offer in terms of public, private, and bridge insurance programs.

Dr. Roubideaux gave a quick update on the IHICIA, stating that a decision would be forthcoming on section 157, regarding Tribes' ability to purchase insurance for their employees. Regarding the Veterans Administration (VA) reimbursement provision and sharing facilities provision in the IHICIA, she said IHS had been working on the issue with the VA and had made progress. She said that she was hopeful that Tribes would be asked to consult on the issue very soon.

A motion was made and passed to adjourn the meeting, after which a closing prayer was provided.