

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

January 17-18, 2012 – Washington, DC

Executive Summary

The Secretary's Tribal Advisory Committee (STAC) Meeting was held on January 17-18, 2012, in Washington, DC. The meeting provided an opportunity for the STAC to address committee procedures; set its priorities for 2012; hear from Health and Human Services (HHS) Secretary Kathleen Sebelius and other Federal representatives on various HHS updates; discuss relevant issues and concerns to Indian Country; and provide advice and recommendations to top HHS leadership. Facilitated by the STAC's Chairman Ken Lucero, the meeting included topical presentations, a roundtable discussion, and opportunities for question and answer. Among the highlights of the meeting included discussions on the Affordable Care Act (ACA), updates on Intradepartmental Council on Native American Affairs (ICNAA) activities, and the STAC's future role in HHS budget discussions.

The first day of the meeting began with greetings from the Chairman and an invocation by Chester Antone, Council Member, Tohono O'odham Nation. After committee and audience self-introductions, Paul Dioguardi, Director, Office of Intergovernmental and External Affairs (IEA), reviewed the agenda and acknowledged the new appointments of Phyllis Davis, Tribal Council Member, Match-E-Be-Nash-She-Wish; and Gary Hayes, Chairman, The Ute Mountain Tribal Council, to the committee.

HHS Chief of Staff Sally Howard updated the STAC on the Secretary's recent activities, noting her travel around the country to talk about the ACA.

In order to ensure regular rotation of its members, the STAC randomly selected 1- and 2-year assignments—three 2-year terms and two 1-year terms for At-Large members; and six 2-year terms and six 1-year terms for Area Delegates. Additionally, Chairman Lucero was re-elected as the committee's Chair; and Steven Ortiz, Tribal Chairman, Prairie Band of Potawatomi Nation, was elected as Co-Chairman of the STAC. All terms started January 17, 2012.

For the *Update: Intradepartmental Council on Native American Affairs* session, Lillian Sparks, ICNAA Chair and Commissioner, Administration for Native Americans (ANA), updated the STAC on the subcommittees' activities; and Yvette Roubideaux, Director, Indian Health Service (IHS), reminded the STAC of the importance of its recommendations in guiding that Council's work. It was noted that the Tribal Eligibility/In-Eligibility for Grants data matrix would be adjusted; and the success of the Tribal Access workshops was discussed.

In setting its priorities for 2012, the STAC contemplated a range of topics from funding issues, to the "477" initiative, to the definition of "Indian," to monitoring Tribal-State relations. One resounding message, "Programs in Indian Country can't stand any cuts" emerged from the discussion.

Ultimately, the group decided on four main priorities (Funding, Affordable Care Act, Tribal-State Relations, and Policy and Regulatory Issues), with sub-priorities therein.

Staff and Operating Divisions' work on Indian issues and initiatives was highlighted during the *HHS Federal Member Roundtable Discussion* session. Specifically, the STAC heard from representatives of the National Institutes of Health (NIH); Administration on Aging (AoA); Health Resources and Services Administration (HRSA); Indian Health Service (IHS); Substance Abuse and Mental Health Services Administration (SAMHSA); Centers for Medicare & Medicaid Services (CMS); Office of Minority Health (OMH); Office for State, Tribal, Local, and Territorial Support from the Centers for Disease Control and Prevention (CDC); and Administration for Children and Families (ACF).

Mayra Alvarez, Director of Public Health, Office of Health Reform (OHR), provide the STAC with updates on the ACA. Among the highlights of her presentation included information on Innovation Challenge Awards; an announcement in December 2011, about \$14 million awarded to 45 School-based Health Centers; continued work on the Partnerships for Patients initiative; various activities/projects that have helped to strengthen Medicare; significant increases in National Health Service Corps members; a new Innovations Advisors Program; and progress on meeting goals set for the 2014 insurance Exchanges. As part of the session, Geoffrey Roth, Senior Advisor, IHS, provided the STAC with updates on the Indian Health Care Improvement Act (IHCA). He indicated that the summary table produced in July 2011, which summarizes the IHCA section-by-section and provides updates on its implementation, is being revised.

The second day of the STAC meeting began with Councilman Antone providing the invocation, immediately followed by an *Executive Session* that was closed to the public.

During the *HHS Budget Updates* session, Norris Cochran, Deputy Assistant Secretary for Budget, provided an overview of the budget process and updated the STAC on the status of the HHS budget. He noted that in December 2011, Congress passed a "megabus" and provided a 5.8 percent increase to the IHS budget over the previous year. He stated that among the IHS areas that received increases included contract health services, contract support costs, and healthcare facilities. He cautioned that sequestration was still on the table, possibly triggering \$1.2 trillion in automatic reductions over coming years (with Medicaid and certain ACF programs being exempt). Mr. Cochran informed the STAC that the President's budget would be released on February 6, 2012, followed by hearings and presentations by Secretary Sebelius and Dr. Roubideaux.

For the *HHS OPDIV Budget Highlights* session, select HHS staff provided information to the STAC regarding their operating division's 2012 budget while placing an emphasis on benefits to Tribes. Budget highlights for HRSA, OMH, AoA, NIH and SAMSHA were presented. Commissioner Sparks agreed to provide the STAC with a written budget update for ACF, noting that the ACF Tribal Consultation was scheduled for March 5-6, 2012.

For the *Consultation* session, Stacey Ecoffey, Principal Advisor for Tribal Affairs, IGA, directed the STAC to the meeting packet for information on the dates and locations of 2012 Regional Tribal Consultation sessions, and planning call schedules. She noted that the regional sessions would focus on STAC and ICNAA priorities, regional perspectives, and Tribal priorities. Additionally, she indicated that a day was added to the regional sessions to accommodate one-on-one sessions with

individual Tribes; and the use of a follow-up document would be employed to track testimony and Federal responses. For the annual HHS Budget Consultation, Ms. Ecoffey said the 3-day event will comprise a Resource Day, one-on-one sessions with Tribes, and the budget consultation. The first planning call is schedule for February 1, 2012.

Ms. Ecoffey began the *Expansion of Services: Tribal Self-Governance* session by distributing a list of Tribal members serving on the Tribal Self-Governance Tribal Federal Workgroup. She indicated that 40 original survey questions about self-governance were paired down to 10 questions and sent to Tribes. She said approximately 20 comments were received and are being compiled for review at the workgroup's first meeting in February 2012. Noting that legislation would likely be needed to move the issue forward, she said the workgroup would consider creative strategies to advance self-governance and report its recommendations to the STAC at its May 2012 meeting.

Ms. Ecoffey stated that she hoped the Tribal-State Relations effort would be off the ground by the end of May 2012. With the potential of several regional directors, STAC members, CMS, and others being involved, she said feedback on what the initiative should look like would be solicited over the coming months.

At the end of the second day, Secretary Sebelius stopped by the STAC meeting to thank the group for its continued work. Noting the value of the STAC's role, she suggested that HHS provide a template for others to follow to set-up their own STAC. She expressed her commitment to encouraging Tribal-State relationships; and she committed to keeping the STAC involved in every step of the ACA implementation.

Chairman Lucero thanked the Secretary for her letter to State Governors regarding Tribal-State relations and her advocacy regarding other Departments having their own Tribal advisory committees. He updated her on the STAC's 2012 priorities, noting its focus on increased funding for Indian Country, the STAC's involvement in the HHS budget process, and outreach to American Indians/Native Americans concerning the ACA. The Secretary agreed to have a presentation that could assist with outreach about the impact of the ACA on Tribes drafted for the STAC's review. Chairman Lucero, with the help of Mary Wakefield, Administrator, HRSA, suggested to the Secretary that the Office of the Assistant Secretary for Planning and Evaluation (ASPE) be employed to better assess the need for program resources in Indian Country (at a micro level that is different from data on health disparities).

The meeting ended with Secretary Sebelius wishing the STAC safe travel back home.