Comanche artist Eric Tippeconnic is an enrolled member of the Comanche Nation on his father’s side and his mother hails from Copenhagen, Denmark. Eric’s interest in painting and art was heavily influenced while growing up on numerous reservations and Indigenous communities as well as from traveling to Denmark each summer to visit his mother’s side. Eric’s cultural diversity and love of history and art from an early age helped develop his interest and passion for creating art from the moment he could hold a pencil. Using bright, rich and vibrant color combinations, Eric utilizes his artwork to capture movement that serves as a metaphor for the viewer which boldly states that Indigenous American cultures while intimately connected to their history are in fact contemporary, alive, and constantly evolving.

In addition to his passion for painting Eric is an avid reader with a constant thirst for knowledge. He is a world traveler having visited over 40 countries for study and pleasure. More recently he was invited to attend a conference held by the Prince of Wales at Windsor Castle where he gave a speech addressing the persecution of the Yazidi peoples in northern Iraq by ISIS.

Eric’s art has been on display in the Washington State History Museum in Tacoma, Washington, The Great Plains Art Museum in Lincoln, Nebraska and at the Chico Art Center in Chico, California. In May 2016, Eric was invited to attend the Native Treasures Art Show in Santa Fe, New Mexico and in June 2016 Eric’s work was on display at the Southern Plains Indian Museum in Anadarko, Oklahoma. Additionally, he was invited as a guest speaker at the 2016 and 2017 Sovereignty Symposium in Oklahoma City. For the 2018 Sovereignty Symposium Eric was the featured artist for their advertising campaign. Eric is also co-curating and exhibition at the Bullock Texas State History Museum which will run from April 2018-January 2019. He has also been selected to show his art at the Santa Fe Indian Market, American Indian Arts Market Place at the Autry in Los Angeles, California and the Indian Wells Art Market in Palm Springs, California.

Eric completed his PhD in History at the University of New Mexico. He is the first Comanche to receive a PhD in History. Eric resides in southern California with his family and teaches at California State University Fullerton.

Eric is represented by Wilde Meyer Gallery in Scottsdale, AZ, True West Gallery in Santa Fe, NM and Rogoway Gallery in Tubac, AZ.
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MONDAY, SEPTEMBER 17, 2018

• Area Caucuses
• Listening Sessions with:
  » Indian Health Service (IHS)
  » Centers for Medicare and Medicaid Services (CMS)
• Special Discussion Session with the National Institutes of Health (NIH)
• Opioid Update and Naloxone Training
• Institutes:
  » Opioid Toolkit
  » Office of Minority Health Resource Center HIV Institute
  » Institute on Accessing and Using Data
• Meetings
  » Briefing Session: Area Caucus 101
  » Tribal Dental Therapy Advocates Meeting
• Opening Reception

TUESDAY, SEPTEMBER 18, 2018

• Area Caucuses
• Remarks from Congressman Markwayne Mullin (R-OK)
• Update on the Indian Health Service from RADM Michael Weahkee
• Culture Night – Hosted by Southern Plains Tribal Health Board

WEDNESDAY, SEPTEMBER 19, 2018

• Morning Fitness Event
• Area Caucuses
• Update from NCAI President, Jefferson Keel
• CMS Update and Panel Discussion
• Public Health in Indian Country Capacity Scan (PHICCS) Meeting
• Annual Heroes in Health Awards Gala

THURSDAY, SEPTEMBER 20, 2018

• Morning Fitness Event
• Area Caucus Report Out
• Closing Plenary Lunch Session
• Remarks from Congressman Tom Cole (R-OK)
What is the NATIONAL INDIAN HEALTH BOARD?

PURPOSE
To advocate for the rights of all federally recognized American Indian and Alaska Native Tribes through the fulfillment of the trust responsibility to deliver health and public health services.

MISSION
Established by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and well-being for our People.

WHAT IS THE NATIONAL INDIAN HEALTH BOARD?
The National Health Board (NIHB) is a 501(c)3 not-for-profit organization serving all 573 federally recognized Tribal governments for the purpose of ensuring that the federal government upholds its trust responsibilities to provide health care to the Tribes. Whether Tribes operate their own health care delivery systems through contracting and compacting or receive health care directly from the Indian Health Services (IHS), NIHB is their national advocate. NIHB also provides policy analysis on American Indian and Alaska Native (AI/AN) health and public health services, facilitates Tribal budget consultation, delivers timely information to all Tribal Governments, leads national Tribal public health programs, assists with Tribal capacity building, provides national and regional Tribal health events, conducts research, and provides training and technical assistance. These services are provided to Tribes, Area Health Boards, Tribal organizations, Tribal Leaders and members as well as federal agencies and private foundations. NIHB works collaboratively with the Tribes, through the Tribal health organizations, in the twelve IHS Service Areas, to accurately capture and present the Tribal perspective in response to federal legislation, regulations and policy. NIHB also serves as a conduit to foster collaboration between Indian Country and national and international organizations, foundations, corporations, academic institutions and other key stakeholders, in its quest to advance Indian health.

OUR BOARD OF DIRECTORS
Because NIHB serves all federally-recognized Tribes, our work must reflect the unity and diversity of Tribal values and opinions in an accurate, fair, and culturally-sensitive manner. This objective is accomplished through the efforts of the NIHB Board of Directors, which is comprised of representatives elected by the Tribes in each of the twelve IHS Service Areas, through their regional Tribal health board or health-serving organization. Each health board elects a representative and an alternate to sit on the NIHB Board of Directors. In Areas where there is no Area health board, Tribal governments choose a representative. The NIHB Board of Directors elects an Executive Committee comprised of a Chairman, Vice-Chairman, Treasurer, and Secretary, who serve staggered, two-year terms and a Member-at-Large who serves a one year term. The Board of Directors meets quarterly.

NIHB MEMBERSHIP
NIHB serves all federally recognized Tribes through our Board of Directors and partnership with Health boards, health-serving organizations, and Tribes in each of the twelve IHS Service Areas.

- **ALASKA AREA**: ALASKA NATIVE HEALTH BOARD
- **ALBUQUERQUE AREA**: ALBUQUERQUE AREA INDIAN HEALTH BOARD
- **BILLINGS AREA**: ROCKY MOUNTAIN TRIBAL LEADERS COUNCIL
- **BEMIDJI AREA**: GREAT LAKES AREA HEALTH BOARD
- **CALIFORNIA AREA**: CALIFORNIA RURAL INDIAN HEALTH BOARD
- **GREAT PLAINS AREA**: GREAT PLAINS TRIBAL CHAIRMEN’S HEALTH BOARD
- **NASHVILLE AREA**: UNITED SOUTH AND EASTERN TRIBES, INC.
- **NAVAJO AREA**: NAVAJO NATION
- **OKLAHOMA CITY AREA**: SOUTHERN PLAINS TRIBAL HEALTH BOARD
- **PHOENIX AREA**: INTER TRIBAL COUNCIL OF ARIZONA
- **PORTLAND AREA**: NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD
- **TUCSON AREA**: TOHONO O’ODHAM NATION & PASCUA YAQUI TRIBE
September 17, 2018

Dear Tribal Leaders, Advocates, Colleagues, and Friends:

Welcome to Oklahoma City, Oklahoma and thank you for joining us for the NIHB 35th Annual National Tribal Health Conference! Gratitude and appreciation goes out to our host and member organization, the Southern Plains Tribal Health Board. Thank you also to our conference sponsors who support our advocacy work through their generosity, and the exhibitors and vendors who are here to offer new ideas and services to improve our health systems, programs and outreach. Most importantly, thank you to the speakers and presenters who share their knowledge and empower us.

This year’s theme, “Tribal Unity to Advance the Promise of Health,” reflects the foundation we stand on: the Promise of Health and the necessity to stand together. We find ourselves in a time when the political status of our people is in question and, therefore, so is our sovereignty. The NIHB Annual Tribal Health Conference is the nation’s most comprehensive Tribal health event and we are pleased that you are part of it during NIHB’s 46th year. It is especially important that you are here so we may come together to uphold sovereignty, strengthen the trust responsibility, to promote and protect the promise of health for our people. Sovereignty is at the heart of our identity and honors the government-to-government relationship between Tribal Nations and the United States. Achieving the promise of health for our people is at the heart of our purpose. Our work, together, must be successful, the health status of our people and the systems that we serve, depend on it.

Through this conference we will examine these topics and we are confident that our voices, together, will carry into the highest quarters of the federal government. We must prevail.

We look forward to the Area Tribal Health Caucuses that will be held each morning, during which Tribal Leaders, Tribal Health Directors, Tribal health consumers and stakeholders will come together to discuss and identify legislative, policy and public health priorities that impact American Indian and Alaska Native health, health systems, public health infrastructure, programs and capacity and Tribal sovereignty. The recommendations made during the Tribal Caucuses will be used to develop NIHB's Legislative and Policy Agenda for 2019.

The NIHB 2018 conference is designed around 5 Tracks:
1. Systems Change through Law, Policy, and Advocacy Native Health Infrastructure
2. Strengthening Medicare, Medicaid, and Health Systems
3. Enhancing Relationships between Tribal and State Governments
4. Opioid, Methamphetamine, Suicide Prevention and Other Tribal Behavioral Health Priorities
5. Native Youth: Making a Difference

Please join us, on Wednesday night for the NIHB 2018 Heroes in Tribal Health Gala, featuring a traditional meal prepared by “The Native Chef” Jason Champagne; this will be a very special evening devoted to honoring warriors in Native health who are nominated from across the country.

There is much to enjoy and many opportunities to learn and be heard. We’re so grateful that you are with us for the NIHB 46th Annual Conference and we look forward to spending this time with you.

Sincerely,

Vinton Hawley
Chairman
Dear Tribal Leaders, Tribal Officials and NIHB Conference Attendees,

Welcome to Oklahoma! On behalf of the Southern Plains Tribal Health Board, I extend a heartfelt invitation to let us know what we can do to help make your stay here more enjoyable. We are so happy to see you and cannot wait to hear what you have been up to and the wonderful plans you have for the future.

Our mission at the SPTHB is as follows:

“The Southern Plains Tribal Health Board is dedicated to serving the tribal nations of the Southern Plains by improving health outcomes for American Indians through partnerships, advocacy, education, and training.”

Over the last several years, the staff at the Southern Plains Tribal Health Board have worked tirelessly to increase our capacity and visibility in the region and nationally in order to reach as many members of the American Indian Community as possible. In order to adapt to a new digital society, we have changed our name, developed and started using a new website at www.spthb.org, and modernized our logo and branding to bring attention to all the possibilities the organization has to offer.

We have also worked closely with the National Indian Health Board to collaborate on efforts and determine best practices for all of our programs and projects. The wonderful relationship we have developed with NIHB is the same relationship we look to build with each of you. Together, we will grow our strength in numbers.

So, again, please let us at the SPTHB know what you have planned and how we can help. And most of all, please enjoy your time in our region. We are so happy you are here.

Sincerely,

Nicholas J. Wahpepah, Interim Executive Director
Southern Plains Tribal Health Board

Promoting healthy communities, serving and strengthening all tribal nations.
REGISTRATION & INFORMATION DESK
The check-in, registration and conference information desk is located in the foyer of the second floor of the Cox Convention Center outside of the ballroom. The desk will be continuously staffed by NIHB staff and volunteers.

REGISTRATION AND INFORMATION DESK HOURS
Sunday, September 16, 2018 ....................... 2:00 pm to 6:00 pm
Monday, September 17, 2018 ..................... 7:00 am to 5:00 pm
Tuesday, September 18, 2018 ..................... 7:00 am to 5:00 pm
Wednesday, September 19, 2018 ............... 7:00 am to 5:00 pm
Thursday, September 20, 2018 ................. 7:00 am to 1:00 pm

EXHIBIT HALL & MARKETPLACE
The exhibit hall and marketplace featuring exhibits and tables from Tribes, universities, government entities, non-profit entities, and talented Native artisans is located in the foyer areas on the second floor of the Cox Convention Center – outside of the ballroom and meetings rooms. Exhibitors and artisans will maintain the following hours of operation:

EXHIBITOR AND VENDOR SET-UP
Sunday, September 16, 2018 ....................... 3:00 pm to 6:00 pm

EXHIBIT HALL AND MARKETPLACE OPEN
Monday, September 17, 2018 ..................... 8:00 am to 5:30 pm  (exhibitors and vendors may choose to remain open for opening reception)
Tuesday, September 18, 2018 ..................... 8:00 am to 5:30 pm  (exhibitors and vendors may choose to remain open for Culture Night)
Wednesday, September 19, 2018 ............... 8:00 am to 5:30 pm
Thursday, September 20, 2018 ................. 8:00 am to 1:00 pm

EXHIBITOR AND VENDOR BREAKDOWN
Thursday, September 20, 2018 .................... 1:00 pm to 3:00 pm

COFFEE AND AFTERNOON SNACKS
NIHB is happy to offer to conference attendees coffee and tea each morning of the Conference starting at 7:00 am and running throughout the day. Also during each afternoon break, Monday through Wednesday, NIHB will be offering an array of snack items. Both the snacks and the coffee will be served in the foyer areas of the second floor of the Cox Convention Center – located close to the exhibitors.

LOST AND FOUND
The lost and found for the Conference will be housed at the Registration and Information Desk in the second floor foyer. NIHB is not responsible for any lost items, but will do our best to try to locate an owner. All unclaimed items in the lost and found still remaining at the end of the Conference will be donated or discarded.
AGENDA CHANGES

Should any last minute changes occur in the agenda, NIHB will do our best to notify participants as soon as possible. Changes to the Conference agenda will be: 1.) noted on the NIHB conference app, 2.) pushed out to participants via the NIHB conference app, 3.) posted daily on the large agenda-at-a-glance posters by the registration and information desk located in the second floor foyer of the convention center, and 4.) announced during the plenary sessions, when possible. NIHB may distribute handouts as well to attendees announcing significant changes as they are made public.

INTERNET

The Cox Convention Center offers complimentary wireless internet. The name of the network is “Renaissance-Conference-Meeting” and the access code is “okchotel18”.

PARKING

The Renaissance Oklahoma City Convention Center Hotel offers valet parking for $27.00 per day. Street parking is $3.00 an hour with a 2 hour maximum. The Santa Fe Parking Garage at 101 N. EK Gaylord Blvd. and costs $10.00 for daily parking. Parking is also available in the parking garage under the Cox Convention Center for a daily rate of $10.00.

CONFERENCE BADGES

Official National Indian Health Board National Tribal Health Conference name badges will be issued to each attendee upon check-in. Please wear your conference name badge at all times as it is your passport to enter all conference activities, including plenary sessions, workshops and scheduled events. NIHB staff will be spot-checking for badges throughout the Conference and may ask to view your name badge if it is not readily visible. Replacement or temporary badges can be requested at the registration desk.

NON-TRANSFERRABLE REGISTRATION

Registration for the National Tribal Health Conference is not transferrable. NIHB will permit a person who is unable to attend the conference to substitute another name for his or her registration. However, once an attendee checks in and receives a name badge, that name badge cannot be given to another person to attend in his or her place. This non-transferrable policy applies to both conference attendees and exhibitors unless previously approved by NIHB leadership.

PHOTOGRAPHY

NIHB staff and volunteers will be taking pictures during the conference activities. By exhibiting, attending, sponsoring and participating in NIHB conference and related events, you are consenting to having photographs and electronic images taken of you. Such photographs and images shall be used by NIHB for marketing, publicity, reporting, and evaluation purposes. Attendees are welcome to take pictures as well of conference activities. However, we ask that attendees find a time and place to respectfully take pictures, ask permission before taking photos, and use them respectfully.

CONTINUING EDUCATION CREDITS

NIHB does not offer any continuing education units (CEUs) or continuing medical education credits (CMEs) for the National Tribal Health Conference.

CODE OF CONDUCT

The National Indian Health Board is dedicated to providing a positive and healthy environment for our conference attendees. The National Indian Health Board National Tribal Health Conference maintains a policy of being drug and alcohol free during all conference-related events, meetings, plenary sessions and breakout sessions. The Board of Directors of the National Indian Health Board and staff respectfully request that all participants, exhibitors, vendors, guests, friends and family members please conduct themselves in a respectful, courteous and appropriate manner at all times to make the conference experience enjoyable for everyone.
TO USE THE APP:
1. Download the app by entering the following URL into your mobile browser: https://crowd.cc/s/2019e
2. Open the app and tap on 2018 NIHB National Tribal Health Conference
3. Click Login for more features!
4. Enter your First and Last Name
5. Type in your email and a verification code will be sent to your email inbox.
6. Enter the verification code from your email.

OR just use this QR code to download the app and then follow from #2 above!!
NIHB would like to thank the generous support offered by all of our conference sponsors

### BEAR LEVEL SPONSORS

- **BlueCross BlueShield of Oklahoma**
  - Blue Cross and Blue Shield of Oklahoma
- **Muscogee (Creek) Nation**
- **Seventh-day Adventist Church**
  - Seventh-day Adventist Church

### WOLF LEVEL SPONSORS

- **CHEROKEE Health Partners, L.L.C.**
  - Cherokee Health Partners
- **Cherokee Nation Health Services**
- **Chickasaw Nation**
- **Choctaw Nation**
- **Hobbs Strauss Dean and Walker**
- **Miami Environmental & Energy Solutions, LLC, Miami Nation Enterprises**
- **Pascua Yaqui Tribe**

### DEER LEVEL SPONSORS

- **Office of Minority Health Resource Center**

### OTTER LEVEL SPONSORS

- **AMERIND Risk**
- **Delaware Nation**
- **Tribal Diagnostics**
- **Wichita and Affiliated Tribes**
This conference track focuses on how law, and policy and Tribally-driven action to influence or create law and policy can impact (or already has impacted) meaningful change at the Tribal, federal, or state systems levels. This includes: congressional and administration actions impacting AI/AN health; taking action on legislative and advocacy priorities; creating and communicating budget priorities; creating and fostering local policy efforts; and optimizing meaningful Tribal consultation.

This conference track has two prongs. The first examines how important coverage programs (like Medicare and Medicaid) contribute to stronger systems and better health outcomes for AI/AN people. The second looks at the efforts under taken to strengthen the I/T/U system at the facility, local, area or national levels. This includes: bolstering both self-governance and direct service health systems; the impact of the Medicaid expansion on Tribal citizens’ health; maximizing third-party reimbursement; facilities, technology and health IT; collaboration between different health systems to strengthen access and health outcomes; and training, recruitment and retention of health care providers.

The workshops and seminars are organized by different tracks so that participants can plan their attendance knowing that certain sessions will have a thematic relationship. Most breakout sessions are 90-minute workshops, but there are also 3 hour seminars that will be offered. It is NIHB’s hope that having this information will help attendees to plan a conference experience that is rich and meaningful. Attendees will be able to identify which sessions belong to which conference track by reading the session descriptions in the program book, looking at the Agenda At-a-Glance in the program book, viewing the full program in the NIHB app, or by viewing the Agenda At-a-Glance poster located by the registration and information desk.
The current political reality has more and more responsibility being delegated to state governments for the administration of health systems, coverage programs, and quality oversight. This conference track focuses on the opportunities that exist to enhance the relationships that currently exist between state governmental and health entities and Tribal governments. This includes: the creation of joint emergency response or crisis plans; steps to enhance communication; bridging state funding and Tribal programming; and collaborative efforts between state and Tribal governments to address health or health delivery systems.

Tribes face a variety of healthcare, public health, and behavioral health needs. This conference track emphasizes the work that Tribes and partners are doing to address these concerns. This includes: creating Tribal behavioral health response systems and strategies for prevention, treatment and aftercare; strengthening the Tribal behavioral health workforce; the role of cultural practices in address behavioral and public health; building infrastructure, capacity and collaboration to advance behavioral health; investments in surveillance, data and epidemiology; laws and policies that support behavioral health.

This track is for Native youth and their allies, with a focus on celebrating youth presenters and youth advocates that are stepping up to take on health challenges in their communities. This includes: how youth councils operate; activities youth have done to make a difference in the community health; youth-led, community-based, or school-based initiatives; successful strategies for engaging youth; supportive pathways for success for AI/AN youth interested in health professions; and youth leadership opportunities and the outcomes experienced.
## 2018 NATIONAL TRIBAL HEALTH CONFERENCE

### AGENDA AT-A-GLANCE

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**SECOND FLOOR HALLWAY, COX CONVENTION CENTER**

- **BALLROOMS D & E**
  - NIH Discussion Session: Safe Infant Sleep in American Indian/Alaska Native Communities
  - Tribal Dental Therapy Advocates Meeting
  - Opioid Update & Naloxone Training
  - Briefing Session: Area Caucus 101
  - OMHRC SMAIF Clinical HIV/AIDS Regional Training
  - Community Health Aide Program (CHAP) 101

- **MEETING ROOM 9**
  - Traditional Wild Rice Uses in Contemporary Dishes
  - Healthy Earth Summit: Inspiration from a Youth-Led Public Health Initiative
  - DHAT Issues in Indian Country
  - Developing Tribal and State Partnerships to Meet the Public Health Needs
  - Eliminating Hepatitis C in Indian Country
  - State-by-State Behavioral Health Services Guide
  - National Veterans Affairs Update & Panel Presentation
  - Creating Realistic Policy Using Community Voices
  - Protecting Human Rights and Tribal Sovereignty in Research Policies
  - Stories from the Field: Native STAND and Other Culturally Relevant Sexual Health Resources for AI/AN Teens
  - Federal and State Indian Health Policy Guide

- **LUNCH**
  - Medicaid Work Requirements: An Update and Path Forward
  - Implementation of Clinical Pharmacy Services at an Ambulatory Healthcare System
  - Bridging the Gap Between State and Tribal Health Department
  - Approaches to Address Food Insecurity in Indian Country
  - Innovative Tribal Response to the Opioid Crisis and Behavioral Health Priorities
  - Retaining Health Care Providers Through Culture and Connections
  - Medicaid: Update on National Policy and Protections for Indians under Medicaid

- **DEVON ENERGY BUILDING**
  - MEET AT REGISTRATION DESK, SECOND FLOOR HALLWAY, COX CONVENTION CENTER
    - Virtual Training Simulations to Support At-Risk Youth
    - Tribal Opioid Litigation: Overview and Update
    - Public and Private Partnerships to Maximize Health Care Coverage for AI/AN’s
    - Medicaid: Update on National Policy and Protections for Indians under Medicaid
    - Culturally Rooted Healing on Yurok Tribal Lands

- **WELLNESS BREAK**
  - Building a Culture of Safety
  - Culturally Appropriate Alternatives: Traditional Healing in Primary Care
  - Enhancing Community Relationships to Implement Community Change
  - Tribal-State Environmental Health Summit: A Foundation for Collaboration
  - Utilizing Modern Strategies to Implement Traditional Cultural Activities in Prevention Programming in the Chickasaw Nation
SUNDAY, SEPTEMBER 16, 2018

2:00 pm – 6:00 pm
Registration and Check-in Open (for participants and exhibitors)
Second Floor Hallway, Cox Convention Center

3:00 pm – 6:00 pm
Exhibit Hall and Marketplace Set-up
Second Floor Hallway, Cox Convention Center
Pre-Conference
(Free of charge and open to the public)

MONDAY, SEPTEMBER 17, 2018

7:00 am – 5:00 pm
Registration and Information Desk Open
Second Floor Hallway, Cox Convention Center

Exhibit Hall and Marketplace Open
Second Floor Hallway, Cox Convention Center

7:00 am – 8:30 am
Area Caucuses: Tribal Leaders and Health Directors
(Each Area is assigned to a different room, see page 30 of the conference book for location)

9:00 am – 5:00 pm
OMHRC SMAIF Clinical HIV/AIDS Regional Training
Meeting Room 18
With support from the Secretary’s Minority AIDS Initiative Funding (SMIAF), the Office of Minority Health Resource Center (OMHRC) in collaboration with the Urban Indian Health Institute and the National Indian Health Board, is implementing the pre-conference training.
This one-day regional clinical training is intended for doctors, nurses, case managers, community health workers, and other health care professionals working in tribal agencies and clinics delivering HIV prevention services. The workshop will increase providers’ knowledge in HIV/AIDS prevention and treatment with presentation topics on Pre-Exposure Prophylaxis (PrEP), HIV/HCV Integration, and HIV & Opioids.
Adrian Dominguez, MS, Scientific Director, Urban Indian Health Institute
Hannahah Blue, MPH, Consultant, JSI Research & Training Institute
Brigg Reilly, MPH, Hepatitis C/HIV National Program Epidemiologist, Northwest Portland Area Indian Health Board
Shervin Aazami, MPH, Public Health Project Coordinator, National Indian Health Board

9:00 am – 12:00 pm
Opioid Toolkit Institute
Meeting Room 16
Responding to the growing prevalence of prescription opioid misuse and addiction rates, in 2016 the Centers for Disease Control and Prevention (CDC) released the Guideline for Prescribing Opioids for Chronic Pain. As the first guideline of its kind, the CDC Guideline outlines recommendations for primary care physicians, nurse practitioners, physician assistants, and internists, to engage in more safe and effective opioid prescribing practices. Under a funding agreement with the CDC, the National Indian Health Board (NIHB) adapted the CDC Guideline for providers in Tribal and Indian Health Service hospitals and clinics. NIHB’s adaptation of the CDC Guideline contextualizes the recommendations by providing additional considerations specific to American Indian and Alaska Native communities. Further, the NIHB Provider Guide provides Tribally-specific and culturally appropriate tools to assist Tribal providers in recognizing and responding to signs of opioid misuse and addiction, engage in safer prescribing, and deliver more quality pain management care. This institute will provide an overview of the CDC Guideline and an in-depth analysis of the NIHB Provider Guide, with particular emphasis on strategies Tribal clinics can use to operationalize the recommendations.
Shervin Aazami, Public Health Project Coordinator, National Indian Health Board

10:00 am – 12:00 pm
Seminar: Gathering Our Data Resources, Processing Them, and Putting Them to Use for Indian Health
Meeting Room 19
The goal is to give attendees the ability to gather data relevant to Indian health, and to process the data in easy to understand formats for grant writing, planning, and reporting. The NIHB Tribal Data Project Director will present a state of the art data-driven ‘Introduction to Indian Health’ to demonstrate how vivid graphic presentations of data can inform and inspire further analysis. Using tableau software, maps of the American Indian and Alaska Native population, income, education, health status and insurance coverage at the national, state and county levels will be presented. Following the presentation, there will be a description of the main sources of data used in the presentation and the tools used to gather and present the information. Your questions will then serve as the start of the balance of the seminar as you learn where to gather the data, tools needed and ‘tips’ to ease this process, how to compile the data into graphics including charts, tables and maps, and suggestions on how to effectively include data into grants, reports and planning documents. You will learn how to ask, respond to and refine research questions that you are often asked, but not sure you can easily answer. The seminar will help you in your work preparing grant applications, planning documents, and community assessments that include data.
Ed Fox, PhD, Director of Tribal Data Project, National Indian Health Board
Pre-Conference, continued

12:00 pm – 1:00 pm
Lunch
(on your own)

1:00 pm – 2:00 pm
**Briefing Session: Area Caucus 101**
*Meeting Room 17*

Area Tribal Caucuses are an important and vital part of the NIHB policy making process. There are several purposes of the caucuses – the most significant of which is to provide the space and opportunity for all Tribal Leaders, Tribal Health Directors, Tribal health consumers and stakeholders to come together to discuss and identify legislative, policy and public health needs that impact American Indian and Alaska Native health, health systems, public health infrastructure, programming, capacity and Tribal health sovereignty. The area caucuses also provide an important opportunity for participants to engage with the Tribal representative that each Area elects or appoints to serve on the NIHB Board of Directors. Join NIHB for a briefing session on the area caucus process.

1:00 pm - 2:00 pm
**Community Health Aide Program (CHAP) 101**
*Meeting Room 19*

The Community Health Aide Program (CHAP) has been operating in Alaska since 1968. To serve Alaska Natives living in remote villages, community-based CHAPs, Behavioral Health Aides (BHA), and Dental Health Aides (DHA) provide services previously only available in Alaska’s largest towns. Currently, 550 CHAPs and 160 BHAs serve 170 Alaska Native villages. The Indian Health Service is currently implementing a national expansion of CHAP/BHA/DHA to bring the program’s successes to Tribes in the Lower 48.

This session will give a background on the program, explore potential benefits of national expansion, and discuss why it’s important to have a local advocacy and involvement.

Xiomara Owens, *Director of Behavioral Health Aide Training, Alaska Native Tribal Health Consortium*

Crystal Stordahl, PA, MMSc, *CHAP Director, Tanana Chiefs Conference*

1:00 pm – 3:00 pm
**NIH Discussion Session: Safe Infant Sleep in American Indian/Alaska Native Communities**
*Meeting Room 11*

The Eunice Kennedy Shriver National Institute of Child Health and Human Development will host a discussion session to gather real-time information about safe infant sleep practices, protective and risk factors, as well as education and outreach priorities, opportunities, and challenges in American Indian and Alaska Native (AI/AN) communities. Participant feedback will help inform future goals and activities of the Healthy Native Babies Project, an ongoing effort to reduce the risk of Sudden Infant Death Syndrome and other sleep-related causes of infant death among AI/AN communities. Participation is encouraged from a wide variety of audiences including elders, Tribal leaders, health directors, health educators, CHRs, home visitors, nurses, service providers, etc.

Kendra King Bowes, MPA, PMP, *Project Manager, Healthy Native Babies Project*

Kristin Helvey, MBA, APR, *Alaska Area Consultant, Healthy Native Babies Project*

Lorena Kaplan, MPA, CHES, *Office of Communications, Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health*

2:00 pm – 4:00 pm
**Tribal Dental Therapy Advocates Meeting**
*Meeting Room 12*

The past year has been a momentous one for Tribes seeking to use dental therapy as a solution to their oral health challenges. This gathering will provide a place for Tribal advocates of dental therapy to come together and discuss the latest challenges and opportunities within the movement to expand Tribal familiarity and utilization of the innovative workforce model.

2:00 pm – 4:00 pm
**Opioid Update and Naloxone Training**
*Meeting Room 16*

This presentation will provide national statistics on the opioid crisis in the Native American population. Details will be given on how to start a new naloxone program in order to reduce the opioid overdose death rate in your community. Training will be provided on how to identify an opioid overdose and how to use the life-saving medication, naloxone.

LT Morgan Greutman, PharmD, BCPS, *Clinical Pharmacist, Choctaw Nation Health Services Authority*

Samantha McGee, *Project Coordinator, Choctaw Nation*

3:00 pm – 5:00 pm
**Centers of Medicare and Medicaid Services (CMS) Listening Session**
*Ballrooms D&E*

3:00 pm – 5:00 pm
**Opening Reception**
*Second Floor Hallway, Cox Convention Center*
Tribal sovereignty has withstood numerous attacks over the years but most recently, the Centers for Medicare and Medicaid Services (CMS) has determined that American Indians and Alaska Natives cannot be exempted from State imposed work requirements for Medicaid because to do so would be a racial preference. Tribes have universally opposed CMS’ determination on the grounds of Tribal sovereignty and the unique government-to-government relationship between Tribes and the United States found in the U.S. Constitution, treaties, statutes, executive orders, and upheld by the U.S. Supreme Court. This session will provide attendees the latest information on attacks on Tribal Sovereignty, the latest from CMS and how Tribes and National Tribal organizations are fighting back.

**Framing the Issue – Sovereignty Under Attack**

Greg Smith, Partner, Hobbs Straus Dean and Walker

Devin Delrow, Director of Policy, National Indian Health Board

**Fighting Back – Tribal and National Response**

Vinton Hawley, Chairman and Phoenix Area Representative, National Indian Health Board; Chairman, Pyramid Lake Paiute

Bruce Pratt, President, Pawnee Nation

Daniel Preston, Councilman, Tohono O’odham Nation

Stacy A. Bohlen, Chief Executive Officer, National Indian Health Board

Kitcki Carroll, Executive Director, United South and Eastern Tribes

Indian Health Service Update and Overview

RADM Michael Weahkee, Principal Deputy Director, Indian Health Service

Congressional Update and Overview

The Honorable Markwayne Mullin, U.S. House of Representatives, Chairman of the House IHS Task Force; Citizen of the Cherokee Nation

The Future of Health Information Technology and Electronic Medical Records in Indian Country

Camilo Sandoval, Executive-in-Charge, Office of Information Technology, Department of Veterans Affairs

Mitch Thornbrugh, Acting Chief Information Officer, Indian Health Service
Empowering a Culture of Health for Lasting Change in Indian Country

Meeting Room 11

As sovereign nations, Tribal governments have the inherent authority to develop laws and policies that protect, support, and maintain the health of their people, lands, and communities. By controlling the policy environment surrounding food and agriculture, Tribal governments can promote better health through improved food access and food-based prosperity. The Tribal Model Food and Agriculture Code Project is a multi-year project designed to assist Tribal governments in the creation of food and agricultural policy that promotes true Tribal food sovereignty and supports improvements in native health and well-being. This presentation will explore the model code as a resource and toolkit designed to assist Tribal governments in promoting long-term health and wellness in Indian Country. Panelists will focus not only on public health provisions in the model code but will also address the critical linkage between Tribal agricultural codes and community health.

Erin Parker, JD, LLM, Research Director and Staff Attorney, Indigenous Food & Agriculture Initiative
Janie Simms Hipp, JD, LLM, Director, Indigenous Food & Agriculture Initiative
Colby Duren, JD, Policy Director & Staff Attorney, Indigenous Food & Agriculture Initiative

Healthy Earth Summit: Inspiration from Youth-Led Public Health Initiative

Meeting Room 16

In 2018, youth leaders with the Indigenous Youth Leadership Program, Inc had a vision to bridge the gap between tribal public health, environmental protection and nutrition. Youth Leaders who were growing gardens and providing nutrition awareness to their communities realized the need to bring together Indigenous Food Producers, Organic Food Growers, Nutrition Programs, Public Health Advocates, Environmental Protection Programs, Social Entrepreneurs, Native Youth, Water & Earth Protectors, Native Chefs, and Native American Market vendors. In partnership with an international organization, the youth created the “Healthy Earth Summit” to highlight the idea among local action-takers that nutrient-nutrition-nourishment cycles (between people and earth) provide immediate and practical economic, physical, and cultural opportunities. Special guest included Sylvia Banda from Zambia. The “Healthy Earth Summit” stimulated practical insights and systemic actions, both immediate and long term, by participants on opportunities linking land, water, food, and wellness systems. Learn about the first ever “Healthy Earth Summit” held in Window Rock, Arizona.

Zunneh-bah Martin, Youth Board Member, Indigenous Youth Leadership Program, Inc.
DHAT Issues in Indian Country
Meeting Room 17

TRACK: SYSTEMS CHANGE THROUGH LAW, POLICY, AND ADVOCACY

Tribes have begun to use their inherent tribal sovereign authority to expand the health care services they provide to Indian people beyond the services that might otherwise be available under state or federal law. Dental Health Aide Therapists (DHATs) have been employed in IHS and tribal health programs in Alaska for over a decade under a federally authorized program. In 2016, the Swinomish Indian Tribal Community became the first tribal community outside of Alaska to employ a DHAT to provide basic oral health services to community members under its own licensing law and regulatory system. This example of Tribal self-regulation drives the evolution of state and federal law and provides innovative and elevated levels of care to the community. The panel will also discuss a pending appeal by the state of Washington from a denial by CMS to allow tribes in the state to recover Medicaid reimbursements for DHAT services.

Geoffrey Strommer, JD, Partner, Hobbs, Straus, Dean, Walker, LLP
Kim Russell, Executive Director, Arizona Advisory Council on Indian Health Care
John Stephens, Chief Executive Officer, Swinomish Indian Tribal Community

Eliminating Hepatitis C in Indian Country
Meeting Room 19

TRACK: STRENGTHENING MEDICARE, MEDICAID, AND HEALTH SYSTEMS

American Indian and Alaska Native (AI/AN) people have the highest mortality rate from hepatitis C virus (HCV) of any race or ethnicity. Hepatitis C can be cured and the Indian Health Service, Tribal and Urban Indian primary care clinics are developing their capacity to provide this cure. By treating at the primary care level, we can begin to eliminate HCV. The Northwest Portland Area Indian Health Board, Northern Tier Initiative for Hepatitis C Elimination, and University of New Mexico host multiple regional teleECHO clinics designed for AI/AN-serving clinicians to treat and cure HCV. The ECHO model is a collaborative model of medical education utilizing case-based learning and care management to democratize knowledge and empowers clinicians to provide better care to more people. Unlike other traditional telemedicine, local clinicians gain the expertise to treat patient within their own communities, an especially important attribute in Indian Country. ECHO increases access to specialty treatment by providing clinicians with the knowledge and support needed to manage patients with hepatitis C. To date, 70 tribal sites, comprised of 125 providers from 7 IHS regions have joined the collaborative learning network. Over 250 HCV patient cases have been discussed. Currently there are 5 Indian Country HCV teleECHO clinics with expansion to 2 additional IHS regions in 2018.

David Stephens, RN, HCV Clinical Services Manager, Northwest Portland Area Indian Health Board
Paulina Deming, PharmD, Associate Professor/Assistant Director Viral Hepatitis Programs, Project ECHO (Extension for Community Healthcare Outcomes), University of New Mexico Health Sciences Center (UNMHSC)
Brigg Reilly, MPH, Hepatitis C/HIV National Program Epidemiologist, Northwest Portland Area Indian Health Board

Developing Tribal and State Partnerships to Meet the Public Health Needs
Meeting Room 18

TRACK: ENHANCING RELATIONSHIPS BETWEEN TRIBAL AND STATE GOVERNMENTS

The Chickasaw Nation’s Division of Research and Public Health has developed a unique partnership with regional public health departments located within the Chickasaw Nation service area. The partnership began in 2016 to maximize influenza outreach efforts across the Chickasaw Nation. The Chickasaw Nation purchased influenza vaccine and partnered with local health departments to dispense the vaccine throughout specific counties in the Chickasaw Nation. To date more than 28,000 residents of the area were reached through the program. In addition to the influenza outreach efforts, the two entities partnered again to participate in a Mass Immunization Prophylaxis Strategy Drill in Ardmore Oklahoma. This drill evaluated the ability of local and Tribal agencies to collaborate, identify, investigate, distribute, and medicate local citizens in the event of a mass outbreak of a deadly disease. Both efforts have been extremely beneficial for the development of the effective and sustainable partnership between the two entities.

Shawwna Ross, RN, MSN, Public Health Nurse Supervisor, Chickasaw Nation
Mendy Spohn, MPH, Regional Administrative Director, Oklahoma State Department of Health
Michael Peercy, MPH, Epidemiologist, Chickasaw Nation
State-by-State Behavioral Health Services Guide
Meeting Room 20

This workshop will provide an overview of an initiative that the National Indian Health Board, in partnership with the Centers for Medicare and Medicaid Services is conducting to document state Medicaid programs across the country and determine what behavioral health, substance abuse and addiction services are reimbursable and identifies which practitioners have been authorized to directly bill for those services. The objective is to provide an administrative tool to aid both in making informed staffing decisions and in achieving full reimbursement for Medicaid services delivered. Ideally, this effort will help IHS and Tribes in their effort to achieve full implementation of the behavioral health related provisions of the Indian Health Care Improvement Act. Workshop attendees are invited to provide feedback on this tool to ensure that it meets the needs of Tribes.

Debby Muskovitch, MSW, Office Manager & Community Development Consultant, North Jackson Company
Ed Fox, PhD, Director of Tribal Data Project, National Indian Health Board

1:30 pm – 3:00 pm
Public Health in Indian Country Capacity Scan (PHICCS) Meeting
Ballroom D

3:00 pm – 3:30 pm
Wellness Break
(Refreshments in Second Floor Hallway)
Chickasaw Nation’s Department of Health houses the Tribal research protections program, which includes a federally registered IRB responsible for reviewing all research that takes place within the Chickasaw Nation. Notably, the Chickasaw Nation’s Department of Health IRB extends the protections afforded to individuals by the Belmont principles to the entire Chickasaw community in order to protect the community and the heritage of the tribe in addition to individual research participants. The research protections program is working to answer several ethical questions, including how Tribal sovereignty relates to the NIH’s single IRB policy, the management and ownership of genomic data, bio-specimen storage and use, and new nation-wide studies such as All of Us. These issues directly impact all tribes and could potentially limit Tribal participation in important health studies. Historically, Native American and Alaska Native data are lacking from large studies that impact health decisions in the United States.

Michael Peercy, MPH, Epidemiologist, Chickasaw Nation

Bobby Saunkeah, RN, MSHCE, CIP, Division of Research and Public Health Manager, Chickasaw Nation

Federal and State Indian Health Policy Guide

Meeting Room 20

The landscape of Indian health policy is evolving at a rapid pace, driven by changes of the Affordable Care Act, new state and federal approaches in value and access to care through Medicaid, and a focus to keep Medicare financially solvent while maintaining access for the growing senior population. These challenges call attention to the need for individuals working in the Indian health system to become more aware and involved in the development of health policy from the beginning. Individuals working in the Indian health system can be a powerful voice and have opportunities to represent their Indian communities in the development of health policy. This workshop will be a working session that focuses on how to get individuals from tribal health programs, as well as others from Indian Country, involved in Indian health policy and what types of tools and resources are needed to make this happen. The session will draw on the experiences and needs of participants.

Jim Roberts, Senior Executive Liaison, Intergovernmental Affairs, Alaska Native Tribal Health Consortium

Sarah Sullivan, MPH, Health Policy Consultant, Northwest Portland Area Indian Health Board

Stories from the Field: Native STAND and Other Culturally Relevant Sexual Health Resources for AI/AN Teens

Meeting Room 19

Youth sexual health messaging can be challenging in Indian Country, where sexual and reproductive decisions are shaped by both traditional and contemporary social norms. Culturally relevant health education curricula are needed to deliver effective, age-appropriate health promotion programs. The Native STAND curriculum – Students Together Against Negative Decisions – incorporates tradition and culture to address STDs, HIV, healthy relationships, and teen pregnancy, while teaching healthy decision-making skills and positive youth development. In this presentation, we will describe lessons learned from our ongoing nationwide implementation at 48 sites, including best practices in delivery approaches to reservation and urban settings, in schools and other community settings, and the incorporation of web-based and social media enhancements. Data on shifts in knowledge, attitudes and behaviors of participating youth will be presented. The Native STAND Project is funded by the CDC Prevention Research Centers (Grant No. U48DP005006).

Michelle Singer, Senior Research Assistant - Native STAND Project Manager, Center for Healthy Communities - Oregon Prevention Center, OHSU-PSU School of Public Health

Michael Logan, Youth Outreach Specialist, Seminole Nation of Oklahoma; Founder, Etem Omvlkusen Unity Council

Colbie Meeks, President, Etem Omvlkusen Unity Council

6:00 pm – 8:00 pm

Cultural Celebration

Hosted by Southern Plains Tribal Health Board

Ballroom D & E
**AGENDA**

**WEDNESDAY, SEPTEMBER 19, 2018**

**6:30 am – 7:30 am**
**Fitness Event: Yoga & Mindfulness**
*Meeting Room 9*

**7:00 am – 5:00 pm**
**Registration and Information Desk Open**
*Second Floor Hallway, Cox Convention Center*

**Exhibit Hall and Marketplace Open**
*Second Floor Hallway, Cox Convention Center*

**7:00 am – 8:30 am**
**Area Caucuses: Tribal Leaders and Health Directors**
*(Each Area is assigned to a different room, see page 30 of the conference book for location)*

**9:00 am-12:00 pm**
**Plenary Session**
*Ballrooms A, B & C*

**9:00 AM – 9:20 AM**
**UPDATE AND OVERVIEW FROM THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) SECRETARY’S TRIBAL ADVISORY COMMITTEE (STAC)**
*Chester Antone, Councilman, Tohono O’odham Nation; Chair and Tucson Area Representative, Secretary’s Tribal Advisory Committee*
*Bruce Pratt, President, Paunee Nation; Oklahoma Area Representative, Secretary’s Tribal Advisory Committee*
*Vinton Hawley, Chairman, Pyramid Lake Paiute; Phoenix Area Representative, Secretary’s Tribal Advisory Committee*
*Victoria Kitcheyan, Council Member, Winnebago Tribe of Nebraska; At-Large-Delegate, Secretary’s Tribal Advisory Committee*

**9:20 AM – 9:40 AM**
**INDIAN HEALTHCARE IMPROVEMENT FUND UPDATE**
*Jim Roberts, Senior Executive Liaison, Intergovernmental Affairs, Alaska Native Tribal Health Consortium Co-Chair, Indian Health Care Improvement Fund Workgroup*
*RADM Kevin Meeks, Deputy Director of Field Operations, Indian Health Service, Alternate Co-Chair, Indian Health Care Improvement Fund Workgroup*

**9:40 AM – 10:00 AM**
**TRIBAL PHARMACEUTICAL LAWSUITS OVER OPIOIDS: OVERVIEW AND UPDATES**
*Timothy Q. Purdon, Partner, Robins Kaplan, LLP*
*Lloyd Miller, Partner, Sonosky Chambers Sachse Miller & Monkman, LLP*

**10:00 AM – 10:20 AM**
**HOW IS CONGRESS FIGHTING THE OPIOID CRISIS?**
*Caitrin Shuy, Director of Congressional Relations, National Indian Health Board*

**10:20 AM – 10:50 AM**
**CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS) UPDATE AND OVERVIEW**
*Tim Hill, Acting Director, Center for Medicaid and CHIP Services, CMS*

**10:50 AM – 11:20 AM**
**HOW CAN MEDICAID AND CMS HELP FIGHT THE OPIOID CRISIS IN INDIAN COUNTRY?**
*Kirsten Beronio, Senior Behavioral Health Policy Advisor, Center for Medicaid and CHIP Services*

**STRENGTHENING AND SUSTAINING STATE – TRIBAL RELATIONS IN THE 21ST CENTURY**
*Reuben Howard, Executive Director, Health Services Division, Pascua Yaqui Tribe*
*Dr. Charles Grim, Executive Director, Cherokee Nation Health Services*

**12:00 pm – 1:30 pm**
**Lunch**
*(on your own)*

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**Seminars**

**1:30 PM – 5:00 PM**

**Bridging the Gap between State and Tribal Health Departments**
*Meeting Room 16*

**TRACK: ENHANCING RELATIONSHIPS BETWEEN TRIBAL AND STATE GOVERNMENTS**

The relationship between states and Tribal Nations can vary by region, state, and Tribal Nation. The United South and Eastern Tribes Tribal Epidemiology Center (USET TEC) has a long history of working with states to access vital statistics data to provide USET Tribal Nations with mortality reports. Currently, the USET TEC has been working to strengthen the relationships between the 27 USET Tribal Nations and the 13 state health departments within the USET region. The USET TEC has coordinated with Southern states to assist in Zika virus outbreak preparedness and response. In 2017, USET was able to work with the Florida health department to provide Zika prevention kits to two Tribal Nations within Florida. USET held an Outbreak Response Workshop in August 2017 for state health departments and USET Tribal Nations. In March 2018, USET collaborated with NIHB to host a vector borne disease workshop for the four Tribal Nations in Louisiana and the Louisiana health department. This workshop focused on services provided by each entity and how
these entities can work together in the future. USET has prepared educational materials for the Louisiana health department on cultural sensitivity to Tribal Nations, and educational materials for the Tribal Nations within Louisiana on the collection protocols of the Louisiana health department. The strengthening of state and Tribal relationships can provide additional funding opportunities, more services and accurate data to Tribal Nations.

Angela Snell, Health Communication Specialist, United South and Eastern Tribes

Innovative Tribal Response to the Opioid Crisis and Behavioral Health Priorities

Meeting Room 18

The Didgwalic Wellness Center is a completely tribally owned, financed and managed by the Swinomish tribe. The Center offers a wrap around approach on many different levels and offers care that is focused on the individual needs of each patient. It is an innovative tribal model that has led to 50 percent capacity since its opening in January 2018. The Center’s services include outpatient treatment services: Primary medical care, mental health counseling, medication assisted therapies (suboxone, vivitrol, methadone), case management and referrals, DUI/deferred prosecution, shuttle transportation and onsite child care. It should have taken three years to construct and open the wellness center, but it was completed in about 15 months. The urgency was driven by the opioid epidemic. The biggest barrier to getting treatment is the lack of available facilities, she said. This center is the largest medication-assisted treatment facility north of Snohomish County and is open to both natives and non-Natives. John will discuss the process in building the clinic and the key factors Washington SPA and Medicaid expansion pool.

John Stephens, Programs Administrator, Swinomish Indian Tribal Community

Christina Peters, Oral Health Director, Northwest Portland Area Indian Health Board

Workshops

1:30 PM – 3:00 PM

Medicaid Work Requirements: An Update and Path Forward

Meeting Room 11

This panel will present an update and overview of State efforts to impose work requirements as a condition of participation in Medicaid through Section 1115 Demonstrations. Panelists will provide both national and state specific updates on this issue. Topics to be covered include CMS’s position that an Indian exemption would raise civil right concerns, and the Tribal response to that position, including the legal response from the CMS TTAG and the political response led by NIHB and NCAI. Panelists will provide an update on the lawsuit in Kentucky to block CMS’s approval of work requirements. Panelists will also provide state-specific examples of how tribes can work with States to address these issues, using Arizona as a case-study.

Elliott Milhollin, JD, Partner, Hobbs Straus Dean and Walker, LLP

Devin Delrow, JD, Director of Policy, National Indian Health Board

Alida Montiel, Health Policy Director, Inter Tribal Council of Arizona

Careers in Biomedical Engineering: Development and Exploration Opportunities for Native Youth

Meeting Room 17

Biomedical engineering has served as an effective vehicle for engineering education and outreach for K-12 students by providing a unique perspective on current healthcare challenges while engaging students to provide a solution. The Stephenson School of Biomedical Engineering at OU has developed a variety of hands-on activities (e.g., 3D-printing hands) tailored to different grade levels designed to generate enthusiasm for the technology side of healthcare and showcase the career opportunities that are available. It is our hope that the multidisciplinary nature of healthcare technology inspires students to approach biomedical engineering as a viable career path. Our team is excited to work with individual tribes on activities suited to their needs at the location of their preference, including students and teachers from K-12 and Tribal colleges alike. The workshop presenters will provide an overview of opportunities, examples of existing Tribal outreach, and, time permitting, a demonstration.
Retaining Health Care Providers through Culture and Connections
Meeting Room 19

Retaining health care providers is essential to providing quality health care to American Indian and Alaska Native communities. Understanding the cultural customs of the community allows providers to better serve their patients. This workshop will focus on current approaches taking place throughout Indian Country that have been used to help strengthen patient-provider relationships. Additionally, through facilitated discussion, participants will share their perspectives and insight in building successful relationships between patients, providers, communities, and Tribes using a cultural lens.

Dena Wilson, MD, FACC, Clinical Consultant, Division of Diabetes Treatment and Prevention, IHS
Kelli Begay, RDN, Nutrition Consultant, Division of Diabetes Treatment and Prevention, IHS

Medicaid: Update on National Policy and Protections for Indians under Medicaid
Meeting Room 20

This session will provide an update on Medicaid policy from a national perspective and highlight some recent State-based developments in terms of proposed changes that have an impact on American Indian/Alaska Native health care. We will cover topics such as the impact of Medicaid expansion, cost sharing protections and exclusion of trust income for Indians under Medicaid, Indian specific provisions under Medicaid Managed Care, the 100 percent FMAP and 4 walls policy, and section 1115 demonstrations.

Kitty Marx, JD, Director of the Division of Tribal Affairs, Centers for Medicare & Medicaid Services
Lane Terwilliger, JD, Technical Director, Centers for Medicare & Medicaid Services

Implementation of Clinical Pharmacy Services at an Ambulatory Healthcare System
Meeting Room 11

Implement the implementation of clinical pharmacy services at an ambulatory healthcare system. Pharmacists play a vital role in the healthcare system. Pharmacists can conduct patient assessments, review medication histories, identify optimal medication choices, and deliver patient education, and provide preventative services. Furthermore, healthcare facilities that have incorporated pharmacists’ clinical skills have reported positive outcomes. The expansion of pharmacy services at the Oklahoma City Indian Clinic (OKCIC) was successful in pharmacist managed and collaborative inter-professional clinics. These clinics have also served as training sites for healthcare professionals. OKCIC has benefited from decreased provider workload and increased patient access to care. The number of pharmacy clinic visits has grown from about 75 patients per month (2015) to 250 patients per month (2017). This has also improved insurance reimbursements and positively impacted the clinic budget. The pharmacists have an enhanced role in reducing disease burden on the Native American population.

Melanie Claborn, PharmD, BCACP, Clinical Pharmacy Specialist/Assistant Professor, Oklahoma City Indian Clinic/Southwestern Oklahoma State University College of Pharmacy
Danica Brown, PharmD, BCPS, Clinical Pharmacist, Oklahoma City Indian Clinic
Gage Boardingham, PharmD, MBA Candidate, IHS Oklahoma Service Area Student Extern, University of Oklahoma Health Sciences Center & Indian Health Service Oklahoma Area Office
Approaches to Address Food Insecurity in Indian Country
Meeting Room 17

This workshop will outline the current state of food insecurity among American Indian and Alaska Native (AI/AN) people, the programs that influence food access in urban and rural Native communities, and the impact on chronic disease. Examples of culturally appropriate approaches and best practices to promote food security at the individual, family, community, and state level when serving AI/AN populations will be shared. The importance of including indigenous perspectives into evidence-based health promotion and chronic disease prevention initiatives will also be discussed.

Kelli Begay, RDN, Nutrition Consultant, Division of Diabetes Treatment and Prevention, IHS
Shondra McCage, MPH, MCHES, Diabetes Care Center Program Manager, Chickasaw Nation Department of Health

Harnessing Youth Innovation to Solve Pressing Health Problems in Indian Country
Meeting Room 19

Native youth are strong, resilient, engaged, and acutely aware of the political and social tides shaping our world. Some are choosing to take on leadership roles in their communities and committing themselves to making positive change.

This workshop is led by 4 National Indian Health Board Health (NIHB) Policy Fellows who are doing just that. Please join us as they share stories about their journeys working with Tribal leadership to understand some of the most pressing health issues facing our communities today. Information will be provided about the Health Policy Fellowship, NIHB’s mini-grant opportunities for youth, and how you can be an advocate for change in your community.

Wendee Gardner, MPH, DPT, Native Youth Engagement Manager, National Indian Health Board
Tamee Livermont, 2017-2018 NIHB Policy Fellow, National Indian Health Board
Maka Monture, 2017-2018 NIHB Policy Fellow, National Indian Health Board
Betsy Waller, 2018-2019 NIHB Policy Fellow, National Indian Health Board

Legislative Priorities on Medicaid
Meeting Room 20

Discuss federal legislative proposal by the Tribal Self-Governance Advisory Committee to address gaps in access to health care services under Medicaid for low- and moderate-income American Indians and Alaska Natives.

Doneg McDonough, Technical Advisor, Tribal Self-Governance Advisory Committee
Elliott Milhollin, JD, Partner, Hobbs Straus, Dean and Walker, LLP
6:30 am – 7:30 am  
Fitness Event: Walk/Run  
Meet at Registration and Information Desk, Second Floor Hallway, Cox Convention Center

7:00 am – 1:00 pm  
Registration and Information Desk Open  
Second Floor Hallway, Cox Convention Center  
Exhibit Hall and Marketplace Open  
Second Floor Hallway, Cox Convention Center

7:00 am – 8:00 am  
Area Caucuses: Tribal Leaders and Health Directors  
(Each Area is assigned to a different room, see page 30 of the conference book for location)

Seminar  
8:30 AM – 12:00 PM

Breaking Through: Taking Action on State Level and Advocacy Priorities  
Ballroom D  
TRACK: ENHANCING RELATIONSHIPS BETWEEN TRIBAL AND STATE GOVERNMENTS

Just like tribes, every state in the U.S. has unique styles and processes – especially when it comes to moving legislative and advocacy priorities from starting blocks to the finish line. In order to gain traction for your initiatives, it's important to understand the annual legislative session “great cycle of life.” In this session you will learn the stages of a typical State of Oklahoma legislative calendar year, key legislative positions employed by the state to help you through the process, what interim studies are and how to use them for educational advocacy, and review a case study that contains key lessons learned through the full developmental stages of bill drafting to law passage. Attendees will also hear about Tribal advocacy efforts in Arizona, which has recent victories in the areas of oral health and Medicaid.

Kelly Roberts, Family Services Advisor, Chickasaw Nation  
Melissa Gower, Senior Advisor and Policy Analyst, Chickasaw Nation  
Alida Montiel, Health Policy Director, Inter Tribal Council of Arizona

Workshops  
8:30 AM – 10:00 AM

Virtual Training Simulations to Support At-Risk Youth  
Room 16  
TRACK: NATIVE YOUTH: MAKING A DIFFERENCE

An overview of Virtual Training Simulations in Indian Country. This presentation offers 3 evidence based simulations with exclusive use for all federally recognized tribes, bureau of Indian education schools and their partners. The simulations cover topics such as: thoughts of suicide, anxiety, becoming trauma-informed, empowering positive decisions, effective and ineffective ways to approach friends, mental health, cyberbullying, cutting, and disruptive behavior in youth. Participants will become familiar with the simulations, the process of accessing them, and a discussion on resources and ways to implement in their own community. A Tribal youth advocate will share her personal story about the importance of training youth on mental health and suicide prevention.

Hilary Hullinger, MPH, Technical Assistance Coordinator, OJJDP Tribal Youth Training and Technical Assistance Center  
Cortney Yarholar, MSW, Program Manager, OJJDP Tribal Youth Training and Technical Assistance Center  
Kaitlyn Pinkerton, Youth Advocate

Tribal Opioid Litigation: Overview and Update  
Meeting Room 17  
TRACK: OPIOD CRISIS, METHAMPHETAMINE, SUICIDE PREVENTION, AND OTHER TRIBAL BEHAVIORAL HEALTH PROBLEMS

Over 60 Indian Tribes have joined 1,000 state and local government lawsuits filed across the country against the manufacturers, distributors and retailers of prescription opioid drugs. Most of these cases have been consolidated before Ohio Federal Judge Dan Polster. In June 2018 Judge Polster established a Tribal Track in the litigation, and selected the Muscogee (Creek) Nation and the Blackfeet Tribe to be “bellwether” (or test) cases. The pharmaceutical defendants have now filed motions to dismiss those two cases and Judge Polster has given advance approval for other tribes to join together in an “amicus” brief in support of the Muscogee and Blackfeet tribes. This workshop will educate attendees on the history and status of the opioid litigation, and on the opportunities tribes now have to participate in that litigation in an “amicus” capacity.

Lloyd Miller, Partner, Sonosky Chambers Sachse Miller & Monkman, LLP  
Timothy Purdon, Partner, Robins Kaplan, LLP
Public and Private Partnerships to Maximize Health Care Coverage for AI/ANs

Meeting Room 18

TRACK: STRENGTHENING MEDICARE, MEDICAID, AND HEALTH SYSTEMS

In recent years, state-based payers are shouldered with more and more responsibility for meeting unmet healthcare needs and working communities directly to spark innovation. The Oklahoma Health Care Authority (OHCA) and Blue Cross and Blue Shield of Oklahoma (BCBSOK) have a shared commitment for healthy Tribal communities through collaboration and meaningful communication with Tribal stakeholders.

The disproportionately high number of uninsured American Indians and other barriers to access health services, present unique challenges to bringing resources to the ITU health systems. This workshop will discuss established best practices in collaborative efforts with ITU health systems, and highlight examples of successful collaborations and best practices that can be implemented in other states.

Lucinda Myers, MSW, Tribal Relations Specialist, Government Relations Specialist, Blue Cross Blue Shield of Oklahoma

Dana Miller, Director of Tribal Government Relations, Oklahoma Health Care Authority

Medicaid: Update on National Policy and Protections for Indians under Medicaid

Meeting Room 19

TRACK: STRENGTHENING MEDICARE, MEDICAID, AND HEALTH SYSTEMS

This session will provide an update on Medicaid policy from a national perspective and highlight some recent State-based developments in terms of proposed changes that have an impact on American Indian/Alaska Native health care. We will cover topics such as the impact of Medicaid expansion, cost sharing protections and exclusion of trust income for Indians under Medicaid, Indian specific provisions under Medicaid Managed Care, the 100 percent FMAP and 4 walls policy, and section 1115 demonstrations.

Kitty Marx, JD, Director of the Division of Tribal Affairs, Centers for Medicare & Medicaid Services

Lane Terwilliger, JD, Technical Director, Centers for Medicare & Medicaid Services

Culturally Rooted Healing on Yurok Tribal Lands

Room 20

TRACK: OPIOID CRISIS, METHAMPHETAMINE, SUICIDE PREVENTION AND OTHER TRIBAL BEHAVIORAL HEALTH PRIORITIES

The Yurok Tribe, California’s most populous Native American Tribe, is located in the Northwestern corner of the state. Del Norte County and the Yurok Tribal Lands were one of 14 California sites chosen by a health foundation for a 10 year initiative focused on improving health outcomes. One powerful tool for creating sustainable change was building capacity of residents to change systems and policies through community organizing. Residents sought to find the most pressing health needs. On the most remote part of the Yurok reservation, the root of many issues was a common need for a return to a more traditional land management system to improve the health of both the land and the people. After 100 years of fire suppression efforts the land was overgrown, traditional gathered food sources were scarce and large game was almost non-existent. The physical and mental health of Tribal members was also at a critical point; diabetes and obesity were above predicted levels and the suicide rate was rising drastically. It was discovered that the root of many of the health issues was a need for a return to a more traditional land management system. Together with the Yurok Tribal government, local land owners and state and federal agencies, residents successfully led a return to a more traditional and culturally appropriate lands management system. This community win has resulted in additional resident-led actions to create policy and systems change to address health and social inequities.

Rob England, MA, Health Promotion Manager, United Indian Health Services

Elizabeth Azzuz, Secretary, Cultural Fire Management Council, Yurok Tribe

10:00 am – 10:30 am Wellness Break
Building a Culture of Safety
Room 16
TRACK: STRENGTHENING MEDICARE, MEDICAID, AND HEALTH SYSTEMS

Building a culture of safety
Title: You can’t fix what you can’t see
It’s easy to lose focus on patient safety when you’re working in a small, rural Indian Health Service hospital with constant staffing issues and a building that is on the National Historic Registry. But after Mescalero IHS Hospital scored below average on a survey of patient safety culture, hospital leadership formed a multidisciplinary team to focus on the issues. A root cause analysis revealed that staff did not routinely enter patient safety issues into the electronic incident reporting system (Webcident) and when they did, there was not consistent follow up. The right people were not at the table to address incidents and issues. The patient safety team now includes administration, clinical staff and IT. Through weekly meetings, daily huddles and development of surveys and tracking tools, the team has made many improvements in encouraging a culture of patient safety. Patient safety is now a hospital wide priority supported by hospital leadership and patient safety scores have nearly doubled. In addition to utilizing Webcident, Mescalero IHS is utilizing their data to drive improvement efforts that extend beyond their hospital walls. Effective partnerships with their tribal health programs and surrounding health systems were created to collaborate on community health issues. A community resource guide has been developed for IHS providers to refer patients to for self-management of their health.

Khara Davis, Partnership to Advance Tribal Health
Project Manager, HealthInsight
Greg Powers, Performance Improvement, Mescalero Indian Health Service
Paul Fragua, Manager, Ironside Consulting

Culturally Appropriate Alternatives:
Traditional Healing in Primary Care
Room 17
TRACK: STRENGTHENING MEDICARE, MEDICAID, AND HEALTH SYSTEMS

Southcentral Foundation, an Alaska Native customer-owned health care system, runs a system of integrated primary care, where patients (called “customer-owners” at SCF) have a wide range of services available that they can access as needed. One of these services is traditional healing, where tribal doctors offer culturally relevant counseling and physical healing that is based on the customer-owner’s needs and health goals. Referrals to traditional healing can come from primary care, behavioral health, OB-GYN, internal medicine, or pediatrics. Customer-owners go to traditional healing for a wide variety of reasons, including help with chronic pain, management of chronic conditions, emotional support, and more. 97 percent of customer-owners say they are satisfied with the care provided by SCF, and 96 percent say that their culture and traditions are respected. This session will cover the services offered by SCF’s Traditional Healing Clinic and how it functions within SCF’s integrated care system.

Angela Michaud, DC, CSCS, Clinical Director, Southcentral Foundation

Enhancing Community Relationships to Implement Community Change
Room 18
TRACK: OPIOID CRISIS, METHAMPHETAMINE, SUICIDE PREVENTION AND OTHER TRIBAL BEHAVIORAL HEALTH PRIORITIES

This workshop will share how Gila River Indian Community has implemented a leadership driven approach to developing policies for establishing and enhancing suicide prevention awareness in the community. This will also include the creation of Gila River Indian Community’s Suicide Prevention Media Campaign.

Jaime Arthur, MPH, Prevention Administrator, Gila River Health Care

Tribal-State Environmental Health Summits:
A Foundation for Collaboration
Room 19
TRACK: ENHANCING RELATIONSHIPS BETWEEN TRIBAL AND STATE GOVERNMENTS

Cross-jurisdictional collaboration between Tribes and States is critical, especially during an environmental health crisis, which oftentimes forces different entities to work together towards a common goal. Having a positive existing relationship and effective communication channels is vital to a successful response. During this workshop, participants will hear from both Tribal and state health department representatives that are taking a proactive approach...
to collaboration by convening in-person Tribal environmental health summits. These summits have offered Tribal elders, members, and health department staff an opportunity to meet, exchange resources and build trust with counterparts at state health departments. Presenters will share how they came together to build communication bridges, identify environmental health challenges impacting Tribal communities, jointly host these summits, and ultimately identify culturally appropriate strategies to collaboratively mitigate those challenges.

Jackie Dionne, Director of American Indian Health, Minnesota Department of Health
Clark Halvorson, Assistant Secretary of Environmental Public Health, Washington State Department of Health
Heather Walker, Cultural Resources Coordinator, Office of Drinking Water, Washington State Department of Health

**Utilizing Modern Strategies to Implement Traditional Cultural Activities in Prevention Programming**

*Room 20*

**TRACK: NATIVE YOUTH: MAKING A DIFFERENCE**

Define Your Direction is a youth/community-created and driven prevention program based on input gathered from youth residing throughout Chickasaw Nation. Define Your Direction utilizes a multi-pronged, community-based participatory approach to address underage drinking and prescription opioid misuse/abuse and overdose deaths in tribal communities. Since its creation and implementation in 2016, multiple risk factors for youth substance abuse have decreased and protective factors have increased. A key component to the success of the program has been its community-based participatory approach to program development. This process has been particularly important for ensuring youth engagement as the program began to implement culturally-based prosocial activities within our target communities. This presentation will discuss the process for involving youth in programmatic decisions and innovative strategies to close the generational divide by implementing traditional cultural activities and teachings with a modern twist.

Drucilla Jacob, LPN, Partnerships for Success Specialist, Chickasaw Nation
Miranda Willis, Accreditation Coordinator, Chickasaw Nation
Sunzie Harrison, Define Your Direction Youth Ambassador, Chickasaw Nation

**12:30 pm – 3:00 pm**

**Closing Plenary Session**

*Ballrooms A, B & C*

**12:30 pm – 12:45 pm**

**CREATING A PICTURE OF PUBLIC HEALTH CAPACITY IN INDIAN COUNTRY**

Carolyn Hornbuckle, Deputy Director and Director of Public Health, National Indian Health Board

**12:45 pm – 1:05 pm**

**CONGRESSIONAL UPDATE AND OVERVIEW**

The Honorable Tom Cole, U.S. House of Representatives, Chairman of the House Appropriations Subcommittee, Citizen of the Cherokee Nation

**1:05 pm – 2:00 pm**

**AREA CAUCUS REPORTS**

Alaska Area
Albuquerque Area
Billings Area
California Area
Great Plains Area
Nashville Area
Navajo Area
Oklahoma City Area
Phoenix Area
Portland Area
Tucson Area

**2:00 pm – 2:35 pm**

**COMMUNITY HEALTH AIDE PROGRAM NATIONAL EXPANSION OVERVIEW AND UPDATE**

**2:35 pm – 2:50 pm**

**CONFERENCE WRAP-UP**

Exhibit Hall Passport Prizes
2019 Conference Announcements
Closing Comments and Acknowledgements

**2:50 pm – 3:00 pm**

**RETIRING OF THE COLORS**

Citizen Band of Potawatomi Veteran’s Organization

**3:00 pm**

**ADJOURN NATIONAL TRIBAL HEALTH CONFERENCE**
The purpose of this year’s Area Caucuses is to review the 2018 NIHB Tribal Health Legislative and Policy Agenda and provide feedback and recommendations to the NIHB about which priorities should be included in the 2019 National Tribal Health Legislative and Policy Agenda.

Each Caucus will have the opportunity to present their recommendations during the morning plenary session on Thursday, September 20, 2018. Caucuses are also requested to provide their recommendations in a written report to the NIHB Chief Executive Officer, Stacy Bohlen at sbohlen@nihb.org, or in person at the conclusion of the conference.

The results of the Area Tribal Caucus recommendations will be used to draft the 2019 Legislative and Policy Agenda that will be considered during the NIHB 2019 Annual Meeting, which takes place during the first quarter of the calendar year in Washington, DC.
Every year, NIHB engages with Tribes and Tribal leaders to examine the political landscape to set forth an agenda that focuses on key priorities and topical areas that will require targeted efforts and concerted energy to advance throughout the year. This legislative and policy agenda lays the path for NIHB’s work each year, as well as for much of the conference content. Below are the priorities that comprise the 2018 NIHB Legislative and Policy Agenda. Please use these points to help guide your engagement and discussion through the IHS and CMS listening sessions, the discussion session on care and long standing issues at the IHS, and throughout the entire conference.

- Preserve Medicaid protections and expanded eligibility for American Indians and Alaska Natives
- Phase in Full Funding for Indian Health Services and Programs for American Indians and Alaska Natives in the Indian Health Service (IHS) and Beyond
- Enact Mandatory Appropriations for the Indian Health Service
- Increase Appropriations to Indian Country outside of the IHS
- Build Capacity of Tribal Public Health
- Seek Long-Term Renewal for the Special Diabetes Program for Indians at $200 Million
- Create Specific Funding to Address the Opioid Crisis in Indian Country
- Enact Special Suicide Prevention Program for AI/ANs
- Provide Continued Oversight and Accountability on the Indian Health Service - Quality
- Workforce Development for Indian Health and Public Health Programs
- Expand Tribal Self Governance at the Department of Health and Human Services
- Provide Resources to Improve the Health Information Technology (IT) system at the IHS
- Improve Care for Native Veterans
- Ensure the Inclusion of Tribal Priorities in the Farm Bill
- Support Native Youth Policy Agenda
- Regulatory / Administration Requests
- Educate Members of the Administration on Tribal Sovereignty and the Trust Responsibility
- Preserve and Expand Meaningful Federal Tribal Consultation
- Ensure and Facilitate Meaningful Tribal Consultation with the states
- Preserve Medicaid protections and expanded eligibility for American Indians and Alaska Natives
- Improve the Health Information Technology (IT) system at the IHS
- Ensure Tribal Access to Data
- Ensure and improve access to culturally competent quality health care for Native Veterans
- Support IHS Efforts to Expand the Community Health Aide Program (CHAP)
- Change IHS's Interpretation of the Definition of Alternate Resources
NIHB BOARD OF DIRECTOR BIOGRAPHIES AND CONTACT INFORMATION

► Vinton Hawley (Pyramid Lake Paiute Tribe)
NIHB Chairman and Phoenix Area Representative
Chairman, Pyramid Lake Paiute Tribe
E-mail: vhawley@nihb.org

Mr. Vinton Hawley is an enrolled member of the Pyramid Lake Paiute Tribe and is also of Hopi and Tewa descent. Mr. Hawley was seated as the Tribal Chairman of the Pyramid Lake Paiute Tribe in 2015. Mr. Hawley is also the current President of the Inter-Tribal Council of Nevada which requires his involvement with the governing board comprised of the 26 Tribal Chairman representing the indigenous Tribes of Nevada and the Vice Chairman of the National Indian Health Board. He graduated from the Pyramid Lake High School in 1996 as the valedictorian. In his career, he has primarily worked with Tribal youth and elders. He is one of the youngest speakers of the Numu (Paiute) language and before being seated as the Tribal Chairman, he strived to preserve cultural values and preserve the arts and ways of life of his people. As the Tribal Chairman, he continues to promote cultural preservation. This responsibility also carries with it his commitment to the health and welfare of his people. It is with this intent that he is committed to quality health care for all Native people and is honored to be a part of the National Indian Health Board.

► Victoria Kitcheyan (Winnebago Tribe of Nebraska)
NIHB Vice Chair and Great Plains Area Representative
Treasurer, Winnebago Tribe of Nebraska
E-mail: vkitcheyan@nihb.org

Ms. Victoria Kitcheyan is an enrolled member of the Winnebago Tribe of Nebraska currently serving as Treasurer of the Winnebago Tribe of Nebraska. Ms. Kitcheyan takes great pride in her Tribal advocacy work and will continue to carry the sacred message of all Native people.

► Sam Moose (Mille Lacs Band of Ojibwe)
NIHB Treasurer and Bemidji Area Representative
Director of Human Services, Fond du Lac Band of Lake Superior Chippewa
E-mail: smoose@nihb.org

Mr. Sam Moose currently serves as the Director of Human Services at Fond du Lac Band of Lake Superior Chippewa. Previously, Mr. Moose was the appointed Commissioner of Health and Human Services for the Mille Lacs Band. In this role, Mr. Moose oversaw the Band’s three clinic locations and other services in the areas of public health, behavioral health, family services, and community support services. Moose previously served as Commissioner of Community Development and was in charge of the Mille Lacs Band’s public works and...
facilities departments and housing development initiatives. He has also served as the Band’s director of housing. Mr. Moose is active in traditional activities within his community. He grew up near East Lake and graduated from McGregor High School. He has a bachelor of applied science degree in community health with a minor in Indian Studies from the University of Minnesota Duluth and a master’s degree in tribal administration and governance from the University of Minnesota Duluth.

- **Lisa Elgin (Manchester Band of Pomo Indians)**
  **NIHB Secretary and California Area Representative**
  Chairperson, California Rural Indian Health Board
  Tribal Administrator, Manchester Pt. Arena Band of Pomo Indians
  E-mail: lelgin@nihb.org

  Ms. Lisa Elgin is the Tribal Administrator for her Tribe and was hired to the position in May 2014. She is an enrolled member of the Manchester-Pt. Arena Band of Pomo Indians which is located in Mendocino County, CA. She is a board member for Sonoma County Indian Health Project and has served in that capacity since 1999. She is a delegate to the California Rural Indian Health Board (CRIHB) for the past eight years and in October 2014 was nominated as Chair for that Board. Her profession is a legal assistant/legal secretary and she has worked in the legal field for over 25 years. She has worked with a wide array of lawyers who specialize in Federal Indian law. She is an active community member and participates and coordinates events for the health clinic as well as her Tribe.

- **Andrew Joseph, Jr. (Confederated Tribes of the Colville Reservation)**
  **NIHB Member-at-Large, Portland Area Representative**
  Chairman, Northwest Portland Area Indian Health Board
  Tribal Council Member, Confederated Tribes of the Colville Reservation
  E-mail: ajoseph@nihb.org

  Mr. Andrew Joseph, Jr. has served on the Colville Tribal Council for five terms. He is the Nespelem district representative, serving on the following Colville committees: Executive Committee, Veterans Committee as Chair, Health & Human Services Committee as 1st Vice, Tribal Government Committee as 1st Vice, and Culture Committee as 1st Vice. Mr. Joseph is also a voting delegate of the Affiliated Tribes of Northwest Indians (ATNI) and the National Congress of American Indians (NCAI). In July 2007, he was elected Vice Chairman of the Indian Health Service (IHS) Direct Services Tribes Advisory Committee. On January 22, 2009 he was appointed the Chairman of Northwest Portland Area Indian Health Board (NPAIH) and in April 2011 he was elected Chairman. In March 2013 he was elected the Member-At-Large for the National Indian Health Board.

- **William Smith (Valdez Native Tribe)**
  **Alaska Area Representative**
  E-mail: wsmith@nihb.org

  Mr. William F. Smith is a son, father, and grandfather. He was born in Cordova, Alaska in September of 1952, to Chief Marie Smith-Jones (the last full-blooded speaker of the Eyak language) and a fisherman. When Bill was 17, he went into the Army as a heavy duty mechanic and a recovery specialist. Shortly after going into the service he went on his first tour to Augsburg, Germany with the 1/36 field artillery, after returning his next tour was in Long Binh, Vietnam from 1971 to 1972. Returning to the states he was transferred to Port Huachuca, Arizona where he was then again shipped overseas to Germany with the 5/68 armor tank outfit. Bill retired from the service in August of 1977, then moved to Valdez, Alaska to work on boats. In 1981, he stopped working on boats and started working for Alyeska Pipeline Service Company in the Marine Department. After 36 years, in 2017, he retired from Alyeska and is still enjoying his retirement by hunting, fishing and spending time with his loving family. He is the vice president of the Valdez Native Tribe. He also sits on the board of the Alaska Native Health Board and the National Indian Health Board helping as many Alaskan Native and American Indians as possible. Bill is one of the local Tribal Veterans Representatives working for his brothers and sisters with their veteran issues.

- **Donnie Garcia (Jicarilla Apache Nation)**
  **Albuquerque Area Representative**
  Chairperson, Albuquerque Area Indian Health Board
  E-mail: dgarcia@nihb.org

  Mr. Donnie Garcia is a member of the Jicarilla Apache Nation an currently serves his Tribe as a Council Members. Mr. Garcia also serves on the Board of Directors for the Albuquerque Area Indian Health Board and is 2017 Vice-Chair for the Direct Service Tribes Advisory Committee.

- **Vacant**
  **Billings Area Representative**

- **Beverly Cook (Saint Regis Mohawk Tribe)**
  **Chairwoman, Saint Regis Mohawk Tribe**
  E-mail: bcook@nihb.org

  Ms. Beverly Kiohawiton Cook is serving her second term as elected Chief on the Saint Regis Mohawk Tribal Council. For 40 years, Chief Cook has advocated for the rights of Native people in her community of Akwesasne. Chief Cook, a Family Nurse Practitioner, is a prominent voice in the mind-body medicine approach to restoring wellness, reproductive health and environmental justice for Mohawk people. She has presented her signature lecture, “Resiliency from our Roots: You are Creation,” to hundreds of community members as well as national and international audiences. The lecture weaves together Haudenosaunee traditions and beliefs with basic reproductive physiology, encouraging understanding of the responsibilities of men and women and exploration of how trauma can be passed down through the generations.

- **Russell Begaye (Navajo Nation)**
  **President, Navajo Nation**
  E-mail: rbegaye@nihb.org

  Mr. Russell Begaye was born and raised in Shiprock, New Mexico. He is born into the Red House People Clan (Kinlichii’i) and born for the Folded Arms People Clan (Bit’ahnii). Mr. Begaye's maternal grandfather's clan is Red-Running-Into-the-Water Clan (Tachiinii) and his paternal grandfather's clan is Salt People Clan (Ashii’i). Mr. Begaye has worked extensively with Navajo government, neighboring Native American Tribes and organizations to build collaborative partnerships. He has worked with Tribal leaders on developing communities and growing businesses by utilizing business techniques that harmonize with the natural world. In 2011, he began his public service as a Navajo Nation Council Delegate representing the Shiprock Chapter. He served on the Law and Order Committee of the Navajo Nation Council. He strongly advocated for the re-criminalization of over 20 criminal acts against women, children and the disabled. President Begaye strongly believes in unity. He believes that we must work together, the Navajo Nation Council, the Navajo Nation President and all 110 Chapters.
Ms. Marty Wafford has been with the Chickasaw Nation since October 2001 and currently serves as the Under Secretary of Support and Programs in the Chickasaw Nation Department of Health. She holds an Accounting degree. She has over 25 years of experience working in healthcare administration and support. She has served on the internal project management team for 6 years during planning and construction of all three of the Chickasaw Nation Joint Venture projects. She obtained her accounting degree from Southeastern Oklahoma State University. She is a Fellow of the Healthcare Financial Management Association and a Certified Healthcare Financial Professional by the HFMA Board of Examiners. She, her husband, Michael, son Cash, and daughter Lainee live in the Southeastern Oklahoma Area.

Ms. Sandra Ortega is a member of the Tohono O’odham Nation of Arizona and the Chairwoman of the Direct Service Tribes (DST) Advisory Committee. She has been involved with the DST Advisory Committee since 2007 and served as Chairwoman since 2011. Ms. Ortega currently serves as a Tohono O’odham Legislative Council Representative. Ms. Ortega is Chairwoman for the Health and Human Services Committee which provides oversight to the Tohono O’odham Tribe’s Health Programs and the Indian Health Service facilities. She is also Chairwoman for the Human Resources Development Committee which provides oversight to the education department and schools on the Tohono O’odham Nation.

Stacy A. Bohlen is the Chief Executive Officer of the National Indian Health Board (NIHB). With the support of a strong, Tribally-elected Board of Directors, Ms. Bohlen’s service to NIHB has contributed to the organization’s successful work to establish and elevate the Tribal presence for improving health care in the nation’s capital, promoted and strengthened the organization’s service to all federally recognized Tribes, significantly increased NIHB’s budget, staff and connectivity to the Tribes and increased NIHB’s effectiveness. Prior to joining NIHB, she was the Director of Federal Relations for the American Indian Higher Education Consortium, Deputy Director of the American Osteopathic Association’s Washington, DC office, and served on the staff of former U.S. Congressman Bob Traxler. Ms. Bohlen received her Bachelor’s degree in Political Science from Oakland University in Rochester Hills, Michigan. She was born and raised in Michigan.

Shervin Aazami is a Public Health Project Coordinator on the Public Health Policy and Programs team at NIHB. Her work focuses on public health emergency prevention and response; the Climate Ready Tribes project addressing climate health issues; and a cancer project promoting breast, cervical, and colorectal screening initiatives. Prior to NIHB, Ms. Aazami worked in refugee health for several years in southwest Virginia. Ms. Aazami graduated from Virginia Tech with a Master in Public Health (MPH) degree, a concentration in health education and a certificate in global planning and international development with a specialization in Public and Environmental Health. Ms. Aazami also holds a BA in biology with a French minor and lived abroad, primarily in France, for several years.

Carolyn Angus-Hornbuckle is the NIH Director of Public Health Policy and Programs. She previously served as Assistant Deputy Director of Policy & Programs and the Deputy Director for Public Health at NIHB. Prior to joining NIHB, Ms. Angus-Hornbuckle was the Legislative Director for former U.S. Congressman Bob Traxler. In this role, Ms. Angus-Hornbuckle increased NIHB’s effectiveness. Prior to joining the Federal Indian Health Board in January as Deputy Director of Policy, Programs, and Support, Ms. Angus-Hornbuckle held several roles during her tenure including the Tribal Health Board Directors, Ms. Angus-Hornbuckle’s service to NIHB has contributed to the organization’s successful work to establish and elevate the Tribal presence for improving health care in the nation’s capital, promoted and strengthened the organization’s service to all federally recognized Tribes, significantly increased NIHB’s budget, staff and connectivity to the Tribes and increased NIHB’s effectiveness. Prior to joining NIHB, she was the Director of Federal Relations for the American Indian Higher Education Consortium, Deputy Director of the American Osteopathic Association’s Washington, DC office, and served on the staff of former U.S. Congressman Bob Traxler. Ms. Bohlen received her Bachelor’s degree in Political Science from Oakland University in Rochester Hills, Michigan. She was born and raised in Michigan.
Breannon Babbel, PhD, MPH, MPP
Senior Public Health Program Manager
E-mail: bbabbel@nihb.org
Phone: 202-945-7078

Breannon Babbel serves as Senior Public Health Program Manager within the Public Health Policy and Programs Department. This role involves coordinating data collection and analysis of various projects, including examining health equity practices across Indian Country. Prior to joining NIHB, Ms. Babbel completed her PhD in Glasgow, Scotland where her research focused on exploring the role of primary care in addressing health disparities. Originally from Oregon, she received her Master of Public Health (MPH) and Master of Public Policy (MPP) at Oregon State University. Ms. Babbel’s previous work includes research with the Northwest Portland Area Indian Health Board and Oregon’s Marion County Health Department.

Kristen Bitsui (Navajo Nation)
Tribal Healthcare Reform Outreach and Education Program Associate
E-mail: kbitsuie@nihb.org
Phone: 202-507-4084

Kristen Bitsuie is a Tribal Health Care Reform Outreach and Education Program Associate where she provides education and training on Medicaid and CHIP programs. In the past, Ms. Bitsuie worked with Indian Health Service’s Business Office, Contract Health and Health Promotion & Disease Prevention. During her time at IHS, she served as a patient advocate for those who needed assistance when applying for alternate resources. Ms. Bitsuie is a recipient of numerous local and national awards including the Indian Health Service Director’s Award and Oklahoma City area. Ms. Davenport was awarded her JD from the College of Law at Arizona State University in 2009. While there, she completed an internship at the US Attorney’s Office for the District of Arizona. After graduating, she worked as a law clerk for the Office of the General Counsel at the Salt River Pima-Maricopa Indian Community. Ms. Hornbuckle holds a law license in Arizona.

Dominique Covelli, MPM
MMPC Policy Associate
E-mail: docovelli@nihb.org
Phone: 202-507-4076

Dominique Covelli is a recent graduate of University of Maryland (UMD), where she pursued a masters degree in public policy and nonprofit management and leadership. At UMD, her interest in policy grew through internships at the National Immigration Forum and at Grantmakers in Health. Prior to her graduate studies, Ms. Covelli worked for more than five years as a technical writer, supporting Department of Defense and Centers for Medicare and Medicaid Services programs.

Devin Delrow (Navajo Nation)
Director of Policy
E-mail: ddelrow@nihb.org
Phone: 202-507-4072

Devin Delrow is the Director of Policy for NIHB where he seeks out opportunities for advancing the Tribal position in federal policymaking. He also provides analysis, communication, and advocacy materials to Tribes on key health issues. In 2014, Mr. Delrow joined NIHB as the Policy Associate for Medicare, Medicaid and Health Care Reform. Mr. Delrow earned his BA in history from Dartmouth College and a JD from the University of New Mexico, School of Law where he also earned the Indian law certificate. He is a member of the New Mexico State Bar.

Robert Foley, MEd
Chief Program Officer
E-mail: rfoley@nihb.org
Phone: 202-355-5494

Robert Foley is the Chief Program Officer with the National Indian Health Board where he oversees NIHB programmatic and grant activities. Previously, Mr. Foley served as the Director of Public Health Policy and Programs with NIHB, and prior to that worked with the National Native American AIDS Prevention Center delivering capacity building assistance on HIV and other infectious disease, creating national prevention and educational materials, and promoting targeted local social marketing efforts. Mr. Foley worked as a training specialist with the National Network of Prevention Training Centers to train on HIV/STI evidence-based prevention. Prior, he was a research assistant with the Tri-Ethnic Center for Prevention Research at Colorado State University. Mr. Foley graduated with a BA in political science, certificate in Native American studies, and a masters of education from Colorado State University.

Amanda Fox
Operations and Administrative Associate
E-mail: afox@nihb.org
Phone: 202-507-4070

Amanda Fox is the Operations and Administrative Associate at the National Indian Health Board. In this role, Ms. Fox assists with operational
and administrative duties. She grew up in northern Virginia and recently spent time volunteering at the Purple House in Australia, working to bring dialysis care to remote Aboriginal communities. Ms. Fox graduated from Northern Arizona University with a degree in Applied Indigenous Studies.

- **Ed Fox, PhD**  
  Director of NIHB National CMS Data Project  
  E-mail: efox@nihb.org  
  Phone: 202-945-7061

Ed Fox has 24 years’ experience in Indian Health. He is the Former Executive Director of the Northwest Portland Area Indian Health Board, the Indian Health Board of Nevada, the Squaxin Island Tribe’s Health and Social Services Department, and the Health Services Director at the Port Gamble S’Klallam Tribe and the Skokomish Tribe. He was also a professor of government at Eastern Washington University. Mr. Fox has a PhD in political science from the University of Minnesota, and a master degree in Applied Indigenous Studies. From Western Carolina University.

- **Wendee Gardner, MPH, DPT**  
  Native Youth Engagement Manager  
  E-mail: wgardner@nihb.org  
  Phone: 202-548-7297

Wendee Gardner is the Native Youth Engagement Manager with the National Indian Health Board where she is working to grow opportunities for the next generation of Indian health policy advocates and change makers. Since 2004, she has worked in both healthcare and public health settings, focusing on enhancing the health and wellbeing of underserved populations. While working at the Northwest Portland Area Indian Health Board, Ms. Gardner collaborated with Tribal community members to develop a first-of-its-kind, CDC-recognized intervention for AI/AN youth called Native VOICES. There she was also a member of the We R Native team, where she co-led community building workshops and developed culturally appropriate health educational materials. Ms. Gardner completed her MPH from Emory University and her DPT from the University of Wisconsin-Madison.

- **Karrie Joseph, MPH, CHES**  
  Deputy Director, Public Health Policy and Programs Department  
  E-mail: kjoseph@nihb.org  
  Phone: 202-507-4079

Karrie Joseph is the Deputy Director of the Public Health Policy and Programs Department with the National Indian Health Board where she works with Tribes to enhance their readiness for public health accreditation and infrastructure and the Tribal Leaders Diabetes Committee project. Ms. Joseph joined NIHB in March 2015 and brings over twelve years of experience in public health. Prior to joining NIHB, she had the honor and privilege of working with Native communities on the Fort Berthold Indian Reservation in North Dakota and with Eastern Band of Cherokee Indians in North Carolina. She received her BA in anthropology and MPH in health promotion and education, both from the University of South Carolina.

- **Sheri Patterson, MBA**  
  Director of Finance and Administration  
  E-mail: spatterson@nihb.org  
  Phone: 202-507-4080

Sheri Patterson is the Director of Finance and Administration for NIHB where she oversees all fiscal and budgetary components, as well as the operational pieces, of the organization. Originally from Western North Carolina, Sheri has more than 15 years of nonprofit experience in the health and human services field. Her last position was with National Children’s Center where she spent more than five years as a Controller in Washington, DC. Ms. Patterson graduated with an MBA in from the University of Phoenix and a BS in Business Administration from Western Carolina University.
Sarah Price is a Public Health Associate with the National Indian Health Board. She supports Tribal health departments as they increase their readiness to pursue public health accreditation through quality improvement initiatives. She also provides support to the Tribal Leaders Diabetes Committee. Prior to working with NIHB, Ms. Price was a Public Health Associate with the Centers for Disease Control and Prevention, where she worked on infectious and chronic disease prevention initiatives in Suffolk County, New York. Ms. Price obtained her bachelor of science degree from Syracuse University, with a dual major in public health and policy studies.

Caitrin Shuy, MSc
Director of Congressional Relations
E-mail: cshuy@nihb.org
Phone: 202-507-4085

Caitrin Shuy is the Director of Congressional Relations at the National Indian Health Board. In this role, Ms. Shuy coordinates legislative strategy for NIHB, composes position papers and talking points and conducts policy analysis. She also serves as a technical advisory for the Secretary’s Tribal Advisory Committee. Prior to joining NIHB, Ms. Shuy spent three years as a legislative assistant to Congressman Tom Cole (R-OK) where she served as a political advisor and his lead staffer for Native American issues for the congressmen’s work on the House Appropriations Subcommittee on Interior, Environment and Related Agencies – the subcommittee through which Indian Health Service funding originates. Ms. Shuy holds a master of science in comparative politics from the London School of Economics and a bachelors of arts in political science St. Mary's College of Maryland.

Kristina Stark
Public Health Associate (CDC Appointee)
E-mail: kstark@nihb.org
Phone: 202-507-4070

Kristina Stark is serving a two-year fellowship with NIHB as a Public Health Associate from the Centers for Disease Control and Prevention. While at college, Ms. Stark worked as a peer mental health educator and as a certified Spanish medical interpreter, lowering the knowledge, language, and cultural barriers between health provider and patient. She also had the opportunity to work at ACPACYS, a non-profit organization in Cordoba, Spain providing advocacy and services for individuals with Cerebral Palsy. Ms. Stark received her bachelor’s degree from Wellesley College with a double major in biology and Spanish.

Shawn Thomas, MPH (Navajo Nation)
Policy Analyst
E-mail: sthomass@nihb.org
Phone: 202-507-7299

Shawn Thomas works as a Policy Analyst with NIHB. He is member of the Navajo Nation, born and raised in Coal Mine Mesa, AZ on the Navajo reservation. His has worked previously for the Coconino County Health Department in Flagstaff, Arizona; the Niquaually Indian Tribe in Washington State; the Office of Program Research at Social Security Administration in Washington, DC; the Pima County Health Department; and most recently with the Tohono O’odham Nation Health Care in Tucson, Arizona. Mr. Thomas received his bachelor’s degree in molecular and cellular biology and minors in American Indian studies and anthropology from the University of Arizona, and an MPH from Texas A&M University.

Stephen Valliere, MPH (Lac du Flambeau Band of Lake Superior Chippewa Indians)
Public Health Project Coordinator
E-mail: svalliere@nihb.org
Phone: 202-507-4082

Stephen Valliere He works as a Public Health Project Coordinator in the Public Health Policy and Programs Department at NIHB. He is Anishinaabe from Lac du Flambeau, Wisconsin. His experiences as a public health researcher at the Center for American Indian Community Health have involved him on many of key public health initiatives in Indian Country. His primary focus at NIHB is on the Public Health Indian Country Capacity Scan where he joins a team working to create and disseminate a comprehensive profile of the public health system and infrastructure in Indian Country. Mr. Valliere graduated with a BA in American Indian Studies with an emphasis on social welfare from Haskell Indian Nations University. He went on to earn a MPH degree at Kansas University Medical Center.

Jennifer Vigario, MPH
Policy Analyst
E-mail: jvigario@nihb.org
Phone: 202-507-4091

Jennifer Vigario recently joined the National Indian Health Board as the Special Assistant to the CEO. In addition to supporting the Chief Executive Officer, she also works closely with the NIHB Board of Directors. Her prior position was as the Special Events Coordinator with the US Senate Sergeant at Arms. Ms. Vigario also previously managed fundraising events and galas for the American Cancer Society. She spent a year as a full-time volunteer, living in community with adults with intellectual disabilities at L’Arche of Greater Washington, DC. Ms. Vigario attended Loyola University in Baltimore, Maryland, studying comparative culture and literature, sociology and Italian studies.

Brett Weber, MPA
Congressional Relations Coordinator
E-mail: bweber@nihb.org
Phone: 202-507-4086

Brett Weber has been with NIHB since October 2016, working in the Congressional Relations Department on the Tribal Oral Health Initiative. Prior to joining NIHB, Mr. Weber was a policy fellow on the United States Senate Committee on Indian Affairs, working for Vice Chairman Jon Tester of Montana. Mr. Weber graduated from the University of Georgia in 2014 with both a bachelor’s degree in political science and a master’s degree in public administration.

Courtney Wheeler, MPH
Public Health Project Coordinator
E-mail: cwheeler@nihb.org
Phone: 202-507-4081

Courtney Wheeler serves as a Public Health Project Coordinator in the Public Health Policy and Programs Department at NIHB. Prior to NIHB, she worked at the Louisiana Breast and Cervical Health Program as an HPV Specialist focusing on improving HPV vaccination and cervical cancer screening rates in Louisiana. She also has extensive public health research experience. Her main interest in public health is working with underserved populations. As an NIH Public Health Project Coordinator, Ms. Wheeler is working on behavioral health and colorectal cancer initiatives. She completed her MPH at Saint Louis University College of Public Health and Social Justice with a joint concentration in behavioral science health education and epidemiology. Courtney also holds a BA in biology and psychology.
Adrian E. Dominguez, MS
Adrian received his Master of Science in Epidemiology and Bio-statistics from the School of Public Health at the University of California at Los Angeles. In 1988 he was awarded the Harvard University Health Professionals fellowship and attended Harvard University to study neurology and public health. His work includes pediatric lead poisoning in low income areas, HIV/AIDS, maternal and child health, diabetes, breast and cervical cancer, social determinants of health and health equity, community health assessments and evaluations. In 2013, Adrian began teaching as an adjunct professor for Eastern Washington University in the public health program. Adrian serves as a board member for Washington State Public Health Association.

Alida Quiroz-Montiel, Health Policy Director, Inter Tribal Council of Arizona
Alida Quiroz-Montiel, Health Policy Director, is a member of the Pascua Yaqui Tribe and has been at the Inter Tribal Council under the Arizona Health Care Cost Containment System (AHCCCS).

‘Alohi Bikle
Policy & Compliance Coordinator, Papa Ola Lokahi
Born and raised in Hawai’i, ‘Alohi Bikle earned a bachelor’s degree in journalism and mass communication from Humboldt State University as well as a master’s in communication from the University of Southern Indiana. She serves as policy and compliance coordinator for Papa Ola Lokahi, the Native Hawaiian Health Board. She joined POL, having previously served as a Legislative Fellow in the office of U.S. Senator Mazie K. Hirono. Bikle’s stint on Capitol Hill, coupled with her background in communications has deepened her drive to help improve the quality of life for k naka maoli and their families.

Angela Michaud
Clinical Director, Southcentral Foundation
Angela Michaud is a Chiropractor and the Senior Clinical Director of the Traditional Healing Clinic for Southcentral Foundation. Angela joined SCF in 2008. Prior to joining SCF, she had a private chiropractic clinic in Davenport, Iowa and did locum tenens work in Alaska. She earned her doctor of chiropractic degree from Palmer College of Chiropractic in Davenport, Iowa. Dr. Michaud is an active member of the American Chiropractic Association (ACA), Alaska Chiropractic Society (ACS), ICPA, and previously served on the ACS board as a liaison for the ACA to the ACS.

Angela Snell
Health Communication Specialist, United South and Eastern Tribes
Angela Snell is a Health Communication Specialist at United South and Eastern Tribes, Inc. (USET) in Nashville, TN. She holds a Bachelor of Arts degree from Belmont University and is a Licensed Practical Nurse. Prior to coming to USET, she worked at Vanderbilt University Medical Center as a LPN, Surgical Scrub, and Research Coordinator in Adult Cancer and Pediatric Neurosurgery. Before pursuing her nursing license, she worked at USET for seven years as a Data Coordinator and the Project Lead for the GPRA Pilot Project. In her spare time, she volunteers with the Vanderbilt University Rugby Football Club.

Bobby Saunkeah
Division of Research and Public Health Manager, Chickasaw Nation
Bobby Saunkeah (Kiowa) is manager of Research and Public Health for the Chickasaw Nation Department of Health. He received his Bachelor’s from the University of Oklahoma College of Nursing and his Master’s in Healthcare Ethics from Creighton University School of Medicine. He’s chair of the Chickasaw Nation Institutional Review Board, tribal representative on the National IHS IRB and serves as Oklahoma Area delegate on the National Institutes of Health Tribal Advisory Committee. His interests are promoting tribal public health and research infrastructures, strengthening tribal research protections and exploring research and public health ethics principles within the context of tribal sovereignty.

Chris Benge
Secretary of Native American Affairs and chief of staff to Governor Fallin of Oklahoma
Chris Benge served the Oklahoma House of Representatives from 1998 to 2010, spending his last three years as Speaker of the House. After his legislative service, Benge worked in Tulsa Mayor Dewey Bartlett’s administration and then as senior vice president of government affairs with the Tulsa Regional Chamber. In 2013, Governor Mary Fallin appointed Benge to serve as Secretary of State. In 2015 while Secretary of State, she appointed him as Secretary of Native American Affairs. In 2016, Governor Fallin appointed him as chief of staff where he still serves in addition to his role as Secretary of Native American Affairs.
Christina Peters
Native Dental Therapy Initiative Project Director for the Northwest Portland Area Indian Health Board (NPAIHB)

Christina Peters is the Native Dental Therapy Initiative Project Director for the Northwest Portland Area Indian Health Board (NPAIHB). She assists tribes in Oregon, Washington, and Idaho as they improve oral health access and outcomes in their tribal communities.

Christina currently serves on the board of Northwest Health Law Advocates (NoHLA) and the Oregon Oral Health Coalition (OrOHC). She previously served on the WA Health Benefits Exchange Equity Technical Advisory Committee and Healthy Washington Coalition Steering Committee. Christina graduated from the University of Washington with a B.A in Economics.

David is a RN and HCV Clinical Services Manager, Northwest Portland Area Indian Health Board.

He attained his Masters in Social Work from Washington University in St. Louis, MO where he attended as a Buder Scholar for American Indian Studies. Cortney is currently the Program Manager at the OJJDP Tribal Youth TTA Center. He’s worked with national Technical Assistance Centers offering a variety of culturally driven community based initiatives for issues including Suicide Prevention and children’s mental health. He completed the National Multi Cultural Institute, cultural competency instructor training.

Dana Miller
Director of Tribal Government Relations, Oklahoma Health Care Authority

Dana Miller has proudly served on the OHCA team since March 2006. Her career and education, as well as her passion, has been to focus on collaborative governance with tribal partners to improve the health care of tribal communities in Oklahoma. Dana’s professional experience has allowed her to propose and implement innovative strategies that have led to effective policy and best practices. During her tenure, OHCA was the first Oklahoma state agency to implement a tribal consultation policy, the first tribal PACE program in the nation, and the first to promulgate policy for coverage of out-of-state Indian boarding school children. Dana and HCA have been recognized nationally for efforts to address health care disparities among American Indian SoonerCare members.

LCDR Danica Brown, MD
Clinical Pharmacist, Oklahoma City Indian Clinic

Danica Brown earned her Doctor of Pharmacy degree from Southwestern Oklahoma State University and has served the Native American population since. She became a Commissioned Officer in the United States Public Health Service (USPHS). Lieutenant Commander (LCDR) Brown served the Choctaw Nation of Oklahoma for 4 years then moved to the Oklahoma City Indian Clinic (OKCIC) to serve urban Native Americans. At OKCIC, LCDR Brown is the Pharmacy Hepatitis C Clinic manager, coordinator of the annual Flu Booth, an Essential Personnel Team member, Pharmacy Lead for the CT/Radiology Response Team and serves as the interim assistant Director of Pharmacy.

Debby Muskovitch, MSW
Office Manager & Community Development Consultant, North Jackson Company.

Debby received her MSW from the University of Michigan and began her career at the National Multiple Sclerosis Society as the Director of Chapter Services. She went on to serve as a social worker in Minneapolis and later co-founded the North Jackson Company where she still works today.

Dana Miller
Director of Tribal Government Relations, Oklahoma Health Care Authority

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David Stephens
HCV Clinical Services Manager, Northwest Portland Area Indian Health Board

David is a RN and HCV Clinical Services Manager for the Northwest Portland Area Indian Health Board. He was born and raised in the Pacific Northwest and began serving the Tribes of the NW in 2008 working on the design and implementation of digital health resources.

Debby Muskovitch, MSW
Office Manager & Community Development Consultant, North Jackson Company.

Debby received her MSW from the University of Michigan and began her career at the National Multiple Sclerosis Society as the Director of Chapter Services. She went on to serve as a social worker in Minneapolis and later co-founded the North Jackson Company where she still works today.

Dana Miller
Clinical Consultant, Division of Diabetes Treatment and Prevention, IHS

Dr. Wilson is a board certified cardiologist and a member of the Oglala Lakota Tribe from Pine Ridge, SD. Dr. Wilson completed her cardiovascular training at the University of Arizona in 2009. She has worked with the Native American Cardiology Program and the Phoenix Indian Medical Center as a clinical cardiologist. She is currently the Clinical Consultant for the Division of Diabetes Treatment and Prevention and the Chief Clinical Consultant for Cardiology for the Indian Health Service.

Devin Delrow
Director of Policy, National Indian Health Board

Devin Delrow is the Director of Policy for NIHB where he seeks out opportunities for advancing the Tribal position in federal policymaking. He also provides analysis, communication, and advocacy materials to Tribes on key health issues. In 2014, Mr. Delrow joined NIHB as the Policy Associate for Medicare, Medicaid and Health Care Reform. Mr. Delrow earned his BA in History from Dartmouth College and a JD from the University of New Mexico, School of Law where he also earned the Indian Law Certificate. He is a member of the New Mexico State Bar.

Doneg McDonough
Technical Advisor, Tribal Self-Governance Advisory Committee

Doneg McDonough leads the health care consulting firm Health System Analytics and advises clients on maximizing opportunities under the Affordable Care Act (ACA) and the Indian Health Care Improvement Act (IHCIA). Doneg serves as a technical advisor to the Tribal Self-Governance Advisory Committee to IHS where he, in part, reviews federal regulatory developments involving CMS, the Indian Health
Service, and other Federal government agencies implementing the ACA and IHCIA. Doneg also serves as a technical advisor to the Tribal Technical Advisory Group (TTAG) to CMS. Doneg previously worked for state governments on health and social service program management.

- **Donna Tasker**
  CWT National Marketing Director, Veterans Health Administrative
  Ms. Tasker is the National Marketing Director for the Compensated Work Therapy Program (CWT) of the Therapeutic and Supported Employment Services (TSES) in the Office of Mental Health and Suicide Prevention (OMHSP), Veterans Affairs (VA) Central Office. Ms. Tasker began her VA career in 1978 as an Educational Therapist, a Vocational Rehabilitation Specialist, and a CWT Manager prior to assuming her current position in VA Central Office in 2007. Ms. Tasker received her undergraduate degree at the University of South Alabama and her master’s degree at the University of Southern Mississippi in Special and Adult Education.

- **Drucilla Jacob**
  Partnerships for Success Specialist, Chickasaw Nation
  Drucilla Jacob is a member of the Chickasaw Nation of Oklahoma. Drucilla worked for the Chickasaw Nation Department of Health for 15 years as a Licensed Practical Nurse. Drucilla then worked as the American Indian Education Coordinator for Ada City Schools in Ada, Oklahoma. She joined the Chickasaw Nation Division of Research and Population Health in 2018 as the Partnerships for Success Specialist on the Partnerships for Success grant. Partnerships for Success grant focuses on reducing underage drinking and prescription drug abuse/misuse in Chickasaw Nation.

- **Edward Bope, MD**
  Director of GME Expansion, Office of Academic Affairs, Veterans’ Health Administration, Columbus VAHC, Columbus, OH
  Dr. Edward Bope serves as the Director of Graduate Medical Education Expansion for the Office of Academic Affairs (OAA). Dr. Bope is a family physician with leadership experience in clinical, educational, and administrative sectors, including six years as Chief of Primary Care in Columbus, Ohio. He is the Assistant Dean for VA Medical Students at The Ohio State University, and has considerable expertise in Hospice and Palliative Care. As Lead GME Affiliations Officer, Dr. Bope assumes oversight for the GME expansion project authorized by the Veterans Access Choice and Accountability Act (VACAA). He participates in many other OAA initiatives.

- **Ed Fox, Ph.D.**
  Director of NIHB National CMS Data Project
  Ed Fox has 24 years’ experience in Indian Health. He is the Former Executive Director of the Northwest Portland Area Indian Health Board, the Indian Health Board of Nevada, the Squaxin Island Tribe’s Health and Social Services Department, and the Health Services Director at the Port Gamble S’Klallam Tribe and the Skokomish Tribe. He was also a professor of government at Eastern Washington University. Mr. Fox has a Ph.D. in political science from the University of Washington, a BA from University of Minnesota, and a master in public administration from San Francisco State University.

- **Elizabeth Azzuz**
  Secretary, Cultural Fire Management Council, Yurok Tribe
  Elizabeth Azzuz is the Secretary of the Yurok Tribe’s Cultural Fire Management Council. Elizabeth first learned about burning at 4 from her father, who learned about burning from his father. Her mother was a firefighter for the Forest Service and both her parents worked for the BLM before starting their own business. In 2013 Elizabeth was integral to the CFMC’s formation. With help from the Nature Conservancy’s Fire Learning Network and The California Endowment’s Building Healthy Communities initiative the CFMC built partnerships at the local, county, regional, state and federal levels.

- **Elliott Milhollin**
  Partner, Hobbs Straus Dean & Walker, LLP
  Elliott Milhollin is a partner at Hobbs Straus Dean & Walker LLP. He represents and advises tribes and tribal organizations on a variety of Health Care issues, including the Indian Health Care Improvement Act, Affordable Care Act, Medicare, Medicaid and the Indian Self-Determination and Education Assistance Act. He also serves as a technical advisor to the Center for Medicaid and Medicare Service Tribal Technical Advisory Group.

- **Erin Parker**
  Research Director and Staff Attorney, Indigenous Food & Agriculture Initiative
  Erin currently serves as the Research Director of the Indigenous Food & Agriculture Initiative at the University of Arkansas School of Law. She supports the Initiative through development, research and writing, and analysis of legislative and regulatory issues affecting Tribal governments, businesses, and individual producers. Most recently, she authored the 2015 Intertribal Food Systems Report.

- **Gage Boardingham**
  IHS Oklahoma Service Area Student Extern, University of Oklahoma Health Sciences Center & Indian Health Service Oklahoma Area Office
  Mr. Gage Boardingham is a 4th year pharmacy student at the University of Oklahoma Health Sciences Center. He has worked as an IHS Oklahoma Service Area Student Extern at the Oklahoma City Indian clinic for the past three years.

- **Geoffrey Strommer**
  Partner, Hobbs, Straus, Dean & Walker, LLP
  Geoff is nationally recognized for his knowledge of and experience working with the ISDEEA. An active participant in the ISDEEA’s developments and implementation since 1992, Geoff worked on efforts to draft and lobby for amendments to various titles of the ISDEEA. He was involved with the development of Titles IV and V regulations and has litigated a number of precedent-setting cases against federal agencies on contract related issues. He has also co-authored a number of articles on Indian law issues, including, Tribal Sovereign Authority and Self-Regulation of Health Care Services: The Legal Framework and the Swinomish Tribe’s Dental Health Program.

- **Greg Powers**
  Performance Improvement, Mescalero Indian Health Service
  Greg started his career as an Environmental Research Scientist for the EPA and transitioned to cancer research. Greg has had a full career in IHS including laboratory management, quality management, and financial management. He was also the CEO position at the Mescalero IHS Hospital. He served as Development Director in four tribal communities toward the development of Systems of Care including Youth and Adolescent services, Equine Assisted Psychotherapy for Families, Wilderness Therapy for P.T.S.D. and strategies to implement evidence based practice, with Trauma Informed Care including Historical
Trauma related care. He rejoined IHS as the Performance Improvement and Compliance Officer.

Gregory A. Smith  
Partner, Hobbs, Straus, Dean & Walker, LLP

Gregory Smith is a partner in the DC office of Hobbs, Straus, Dean & Walker, LLP, a law firm dedicated to the representation of tribes and tribal interests. For nearly 30 years, Greg has represented Indian tribes and tribal organizations as an attorney and as a government affairs specialist. He currently serves as general counsel for NIEA, USF&I, NCUIH and NIHS, and also is the DC representative for a number of tribes. Greg is a trustee of the National Museum of the American Indian – Smithsonian Institution and is a graduate of Cornell Law School and Yale College.

Hannah Blue, MSPH  
Consultant, John Snow, Inc.

Hannah Blue is Diné (Navajo), and works as a Consultant with John Snow, Inc. She provides technical assistance nationwide on public health projects, including as a Capacity Building Assistance Specialist for the CBA@ JSI HIV Prevention Program and a Community Engagement Specialist for a project to create and implement a statewide media campaign to raise awareness about youth sex trafficking in Wisconsin. She also co-leads a project focusing on promoting behavioral health and addressing substance exposed pregnancies nationwide with a focus on tribal communities. She also serves on the Board of Directors for Café Cultura, an organization that promotes creative expression and leadership among Indigenous and Latinx youth.

Heather Walker  
Cultural Resources Coordinator, Office of Drinking Water, Washington State Department of Health

Heather is a member of the Confederated Tribes of the Chehalis Reservation and descendant of the Quinault, Yakama, and Cowlitz Tribes. Heather works at the Washington State Department of Health overseeing the cultural, historic, and environmental compliance in the Office of Drinking Water. She also serves on multiple advisory commissions and committees within her tribe, local, state, and federal governments. She lives by a value passed down over many generations: “Each and every one is important and not one is unimportant.” Heather is a graduate of The Evergreen State College and Tacoma Community College’s Tribal Enterprise and Gaming Management program.

Hilary Hullinger  
Technical Assistance Coordinator, OJJDP Tribal Youth Training and Technical Assistance Center

Hilary Hullinger, MPH is a member of the Chickasaw Nation. Hilary has a Master of Public Health from the University of Oklahoma Health Science Center, and a BA in Environmental Studies and Native American Studies from the University of Oklahoma. With a passion for health and wellness in tribal communities, the majority of her career has been spent working in minority health, strategic planning, and quality improvement. She currently serves as a Technical Assistance Coordinator for the Office of Juvenile Justice and Delinquency Prevention Tribal Youth Training and Technical Assistance Center hosted at the Indian Country Child Trauma Center.

Jackie Dionne  
American Indian Health Director, Minnesota Department of Health

Jackie is an enrolled member of the Turtle Mountain Chippewa Tribe. While she has worked at the state-level to improve the health of Minnesotans for over twelve years, she currently serves as the Minnesota Department of Health’s (MDH) first Director of American Indian Health/ Tribal Liaison. In this role, she works closely with the MDH commissioner to support collaboration around American Indian health initiatives throughout MDH. Prior to this position, Jackie served as an American Indian aging services specialist at the Minnesota Board on Aging. Jackie has over 20 years of experience working with various Minneapolis American Indian non-profits.

Jackie Foos  
Director of Engineering Recruitment and Outreach, University of Oklahoma

Jackie Foos was born and raised in Oklahoma. She graduated from the University of Oklahoma and with her Bachelor of Science in Zoology, and Master of Science in Health Promotion, before beginning her career at OU. She has worked in the University of Oklahoma Gallogly College of Engineering for eight years as the Director of Recruitment and Outreach. She is passionate about helping K-12 and current college students learn about the opportunities available to them in the STEM fields.

Jaime Arthur  
Prevention Administrator, Gila River Health Care

Jaime Arthur is the Prevention Administrator for Gila River Health Care Behavioral Health Services. She has worked in the field of education with children and families for the last 11 years. Jaime provides program management for grants related to suicide and substance use prevention and early childhood services. Jaime is also Master Applied Suicide Intervention Skills Training (ASIST) Trainer, and a Youth/Mental Health First Aid, Safe/TALK, and QPR Trainer. Jaime loves working with people of all ages.

Janie Hipp  
Director, Indigenous Food & Agriculture Initiative

Janie Simms Hipp, J.D., LL.M (Chickasaw) is Founding Director of the Indigenous Food and Agriculture Initiative. She is an enrolled member of the Chickasaw Nation She served in the Obama Administration as the Senior Advisor for Tribal Relations to Secretary Tom Vilsack, in USDA, as the National Program Leader for Farm Financial Management, Risk Management Education, Trade Adjustment Assistance, and the Beginning Farmer and Rancher Development Program. She also served at USDA Risk Management Agency as the Risk Management Education Director. She has had a long career in the field of agriculture and food law.

Jason Champagne, MPH  
The Native Chef

Jason is a member of the Red Lake Band of Chippewa and hails from Baldwin, Kansas. He attended Le Cordon Bleu at Brown College and began his career as a chef at Walt Disney World. He earned a degree in Community Nutrition and Native American Studies from the University of North Dakota and his Masters in Public Health Nutrition from the University of Minnesota School of Public Health. He accepted a Community Wellness Chef
Jim Roberts
Senior Executive Liaison, Alaska Native Tribal Health Consortium

Jim Roberts is an enrolled member of the Hopi Tribe from of Shungopavi, Arizona. He has over 34 years of experience working in Tribal government and health affairs. Roberts is a Senior Executive Liaison with the Alaska Native Tribal Health Consortium. He works to promote and protect Indian health programs in his work with a team of policy, legal and subject matter experts. Jim helps coordinate intergovernmental relations, legislative advocacy, and policy and budget analysis. He has served as a technical advisor on the reauthorization of the Indian Health Care Improvement Act, assisted in development of Tribal provisions included in the Affordable Care Act, and has helped construct other important Indian health legislation. He also serves as a Board of Trustee for Alaska Pacific University in Anchorage, AK. Prior to his work at ANTHC, Jim worked at the Northwest Portland Area Indian Health Board, where he provided technical expertise to Tribal leaders on health policy, governance, budget and legislative issues. He also worked at the National Indian Health Board from 1997-2003, and previously worked in Bureau of Indian Affairs programs. Jim Champagne will prepare the meal for NIHB’s 2018 Annual Heroes in Health Awards Gala.

Johnny Poolaw
Acting Tribal Liaison, Office of University Community

Johnny Poolaw is of the Kiowa, Delaware, Comanche, and Chiricahua Apache Nations. Johnny holds a Bachelor of Science Degree in Zoology from the University of Oklahoma, a Master of Art in Teaching from Cameron University, a M.Ed., and his Ph.D. in Adult & Higher Education from the University of Oklahoma. In February, Johnny accepted the role of Acting Tribal Liaison Officer at OU where his position with the SMSC community. By spending time developing nutrition programming for this community, Mr. Champagne found his passion – to help other Native Americans understand the basics of culinary arts, incorporate basic strategies to improve the overall nutrient content of foods, and incorporate traditional foods into contemporary food styles. Mr. Champagne will prepare the meal for NIHB’s 2018 Annual Heroes in Health Awards Gala.

John Stephens
CEO for the didgwalic Wellness Center and Senior Health Policy Advisor for the Swinomish Indian Tribal Community

John served the Tribe as its Programs Administrator from 1980 to 2017 and has been responsible for administration for all Health, Education, Social Services and Self Governance. He is works on health policy issues with the NPAIHB and the Washington American Indian Health Commission. He has been a Technical Advisor to the CMS-TTAG, currently serving as the TTAG Representative for the Tribes of Washington, Oregon, and Idaho. He also served as a Technical Advisor to the DHHS STAC. He works on DHAT policy issues and Comprehensive Health Services to address the Opioid Epidemic and Medication Assisted Treatment for the Tribe.

Kelly Roberts, Ph.D
Family Services Advisor, Chickasaw Nation

Dr. Kelly Roberts serves as Advisor for Office of Family and Mental Health within the Chickasaw Nation Department of Family Services. She is a licensed marriage and family therapist and clinical supervisor. Her award-winning research and publications center around family policy, conceptual and programmatic model development, and legislative affairs including tribally affiliated work. She has served in state and national leadership positions within her field; her work has been featured in the New York Times and Chicago Tribune, on CNN, and throughout other media outlets. Roberts has a Bachelor of Arts in Communications, a Master’s of Science in Family Relations and Child Development, and a Ph.D. in Human Sciences with a specialization in Family Policy.

Kaitlyn Pinkerton
Youth Advocate

Kaitlyn started her advocacy when she selected suicide prevention as her platform for the Miss Cherokee Leadership Competition. Kaitlyn’s lived experience has driven her mission to change stigmas about mental health. Kaitlyn is working to implement a Cherokee Nation youth MOVE chapter (Motivating Others through Voices of Experience). She also hopes to implement school wide trainings throughout Cherokee Nation, with support from Cherokee Nation HERO (Helping Everyone Reach Out). Kaitlyn supports the dissemination of Friend2Friend, a youth gatekeeper training video game simulation to help teens identify the signs and symptoms of emotional distress and build skills to link peers to trusted adults.

Kelli Begay
Nutrition Consultant, IHS Division of Diabetes

Kelli Begay, an enrolled member of the Kickapoo Tribe of Oklahoma, is a registered dietitian nutritionist. In her role as the Nutrition Consultant for the IHS Division of Diabetes Treatment and Prevention, Mrs. Begay works with food and nutrition advocates throughout Indian Country on improving the nutrition status of American Indian and Alaska Native people. Kelli has a bachelor’s degree and master’s degree in nutrition, as we well as a graduate degree in business.

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PRESENTER BIOGRAPHIES
**Kendra King Bowes, MPA, PMP**  
*Project Manager, Healthy Native Babies Project*

Kendra provides knowledge in areas of communications and outreach, as well as training and technical assistance. Kendra has been involved with projects serving Indian Country in areas including Sudden Infant Death Syndrome, Fetal Alcohol Spectrum Disorders, tobacco prevention, adolescent pregnancy prevention, housing and community development, and grant development. She works to involve AI/AN communities in projects by developing and tailoring materials for AI/AN audiences, participating in outreach events, and establishing relationships with stakeholders and media. She currently manages contracts and subcontracts supporting the U.S. Department of Health & Human Services. She is a member of the Choctaw Nation of Oklahoma.

**Khara Davis**  
*Partnership to Advance Tribal Health Project Manager, Health Insight*

Khara Davis is an enrolled member of the Turtle Mountain Band of Chippewa Indians of Belcourt, North Dakota. Ms. Davis has over 11 years of experience working at the New Mexico Quality Improvement Organization—HealthInsight. Currently she is a project manager working with the Centers for Medicare and Medicaid Services (CMS) Partnership to Advance Tribal Health (PATH) that provides direct technical assistance to Indian Health Services Hospitals. Ms. Davis is an executive member for the New Mexico Older Adults Fall Prevention Coalition, is a TEAMSTEPp Advanced Master Trainer.

**Kim Russell**  
*Executive Director, Arizona Advisory Council on Indian Health Care*

Kim is of the Bitter Water People, born for the Tangle People. She is from Chiricahua, Arizona on the Navajo Nation. Ms. Russell is the Executive Director of the Arizona Advisory Council on Indian Health Care, an independent state agency whose mission is to advocate for increasing access to high quality health care programs for all American Indians in Arizona. Kim has worked with Tribes, Tribal Organizations, the Indian Health Service, and Urban Indian Health Programs to advance their health agendas and priorities her entire career. Ms. Russell received her BS degree in Biology and a Masters of Health Administration.

**Kitty Marx**  
*Director of the Division of Tribal Affairs, Centers for Medicare & Medicaid Services*

Kitty Marx is the Director, Division of Tribal Affairs, in the Center for Medicaid and CHIP Services, at the Centers for Medicare & Medicaid Services (CMS). CMS Tribal Affairs serves as the point of contact on Indian health issues for the agency and for tribal leaders, Indian health providers, and beneficiaries. Prior to CMS, Kitty served as the Legislative Director, National Indian Health Board. She has also worked for Indian Health Services and for Montana Legal Services in Browning, Montana. Kitty received a Bachelor of Arts from the University of Maryland and a Juris Doctor degree from Vermont Law School.

**Kristin Helvey, MBA, APR**  
*Alaska Area Consultant, Healthy Native Babies Project*

Kristin works across community sectors to assist organizations and individuals in improving communications strategy and execution. Kristin’s Athabascan and Yup’ik heritage has inspired a vested interest in developing and furthering initiatives related to the health and wellness of tribal populations. She has over a decade of experience working with Alaska Native organizations to better understand community health and service priorities, develop and deliver effective health messaging, and cultivate community partnerships.

**Lane Terwilliger**  
*Technical Director, Centers for Medicare & Medicaid Services*

Lane Terwilliger is a Technical Director for the Division of Tribal Affairs within the Center for Medicaid and CHIP Services. For the past decade, Lane has focused on Medicaid and CHIP policy issues, Medicaid section 1115 demonstrations and managed care waivers that impact the AI/AN community and tribal health providers. She worked on implementing the Indian protections in the American Recovery and Reinvestment Act, Children’s Health Insurance Program Reauthorization Act and the Affordable Care Act. She has a Juris Doctorate and a Master’s in Health Law Reimbursement from the DePaul University College of Law.

**Lloyd Miller, JD**  
*Partner, Sonosky, Chambers, Sachse, Miller & Monkman, LLP*

Lloyd Miller is a partner with Sonosky, Chambers, Sachse, Miller & Monkman, a leading tribal rights law firm that for 42 years has advocated for Indian tribes across the United States. Lloyd is best known for four Supreme Court victories which led to Tribes recovering over $1.7 billion against the United States. In 2017, Lloyd represented the Cherokee Nation in the first-ever tribal lawsuit against the pharmaceutical industry over prescription opioids, and the federal courts have selected his client the Muscogee (Creek) Nation as a test case for the Tribal Track established in that massive litigation.

Lloyd is a graduate of Yale University and the University of Virginia Law School. He has repeatedly been recognized by Top Ten Super Lawyers, been named by Best Lawyers as “Native American Law Lawyer of the Year,” awarded “Best Native American Rights Law Firm 2017” by North America News, and honored by the National Indian Health Board.

**Lorena Kaplan, MPA, CHES**  
*Office of Communications, Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health*

Lorena leads the activities of the Safe to Sleep® campaign, a public education campaign of the Eunice Kennedy Shriver National Institute of Child Health and Human Development to help reduce sudden infant death syndrome (SIDS) and other sleep-related causes of infant death. Lorena’s professional experience includes direction of hospital-based health promotion, education and injury prevention services, coordination of multidisciplinary research and health improvement projects, and development of culturally-sensitive health education curricula and services. Lorena earned a Bachelor’s of Science from the University of Washington, a Master of Public Health from the Johns Hopkins Bloomberg School of Public Health, and she is a Certified Health Education Specialist.

**Lucinda Myers, MSW**  
*Tribal Relations Specialist, Blue Cross and Blue Shield of Oklahoma*

Lucinda Myers, MSW (Muscogee/ Seminole) is the Tribal Relations Specialist for Blue Cross and Blue Shield of Oklahoma (BCBSOK). BCBSOK is a division of Health Care Services Corporation, which also operates Blue Cross Blue Shield plans in Illinois, Montana, New Mexico and Texas. At BCBSOK, Lucinda helps strengthen partnerships with Oklahoma’s Tribal Nations in an effort to improve access to care and the overall health and well-being of Oklahoma’s AI/AN population. Prior to BCBSOK, Lucinda served as the Tribal Liaison for the Oklahoma Department of Mental Health and Substance Abuse Services and as the Health Careers Director for the Association of American Indian Physicians.
Majed Ibrahim  
*Program Manager, VHA Office of Community Care, Colorado, Veteran Administration*

Majed has been serving Veterans while working for the US Department of Veterans Affairs (VA) for almost 12 years. Majed worked for VA in various positions at the local Medical Center, Network and headquarters level. Currently, Majed is the Program Manager for Indian Health Service (IHS)/Tribal Health Program (THP) National Reimbursement Program within the VA Office of Community Care. Majed is a Senior Level Certified Program Manager with a Bachelor’s Degree in Biomedical Engineering, Masters in Electrical Engineering and an MBA.

Congressman Markwayne Mullin  
*U.S. House of Representatives, 2nd District, Oklahoma*

Congressman Markwayne Mullin was first elected to Oklahoma’s Second Congressional District in 2012. He is currently serving his third term in office. Mullin currently serves on the House Energy and Commerce Committee whose broad jurisdiction includes issues important to rural Oklahoma including energy policy, health care, commerce, and manufacturing. The committee has created the Indian Health Service Task Force, which Rep. Mullin serves as a co-chair. The Task force is meant to examine ways to reform IHS to better serve the 2.2 million AI/AN’s that receive services from IHS.

Melanie Claborn, Pharm.D.  
*Clinical Pharmacy Specialist/Assistant Professor, Oklahoma City Indian Clinic/Southwestern Oklahoma State University College of Pharmacy*

Dr. Melanie Claborn received her Doctor of Pharmacy from Southwestern Oklahoma State University in Weatherford, Oklahoma. She completed both a PGY1 and Ambulatory Care Specialty residency at the Central Arkansas Veterans Healthcare System, in Little Rock, Arkansas. She is currently an Assistant Professor at SWOSU and a Clinical Pharmacy Specialist at the Oklahoma City Indian Clinic. She serves as a faculty preceptor for SWOSU pharmacy students while managing a cardiovascular risk reduction clinic, a pediatric asthma clinic, and diabetes education classes at ORCIC.

Melissa Gower  
*Sr. Advisor and Policy Analyst, Chickasaw Nation*

Melissa has worked as the Senior Advisor, Policy Analyst for the Chickasaw Nation since January 2015. Her focus is health policy issues at the state and national levels. Gower was the recipient of the Henry J. Kaiser Family Foundation Native American Health and Wellness Policy Fellowship and has received numerous awards including: NIHH’s 2016 National Impact, Oklahoma City Area IHS Area Director’s Service, Excellence in Management, Superior Management and Employee of the Year. Gower has a Bachelor of Science in Health Care Administration from Northeastern State University where she graduated Magna Cum Laude. She is a citizen of the Cherokee Nation.

Mindy Spohn  
*Regional Administrative Director, Oklahoma State Department of Health*

Mindy Spohn is the Regional Administrative Director for the health departments in Carter, Johnston, Love, Marshall, Stephens and Jefferson Counties. She has a master’s degree in public health epidemiology and a bachelor’s degree in microbiology, both from the University of Oklahoma. She has worked for the Oklahoma State Department of Health for twenty-five years in various roles. She served as president of the Oklahoma Public Health Association and as a member of the Oklahoma Injury Prevention Council.

Michael Detamore  
*Founding Director and Professor of the Stephenson School of Biomedical Engineering*

Michael Detamore earned his Ph.D. in bioengineering from Rice University and was a Professor at the University of Kansas for 12 years before joining OU in 2016. He was a Fulbright Scholar and visiting Professor at NUI Galway in Ireland in 2011, and is a Fellow of the American Institute of Medical and Biological Engineering. He has published over 115 papers, and has been awarded six U.S. patents, and has given ~80 invited lectures around the world. In addition to his research, he enjoys teaching and has won numerous teaching awards.

Michelle Singer  
*Senior Research Assistant - Native STAND Project Manager, Center for Healthy Communities - Oregon Prevention Center, OHSU-PSU School of Public Health*

Michelle Singer, Senior Research Assistant, OHSU-PSU School of Public Health and Project Manager, Center for Healthy Communities’ core research project, Native STAND (Students Together Against Negative Decisions) Dissemination, Implementation and Evaluation Project. The Center for Healthy Communities is one of 26 CDC-funded Prevention Research Centers across the nation. Oregon’s PRC is committed to addressing the health promotion and chronic disease prevention needs of AI/ANs, and other underserved communities through community-based participatory research, training opportunities, program dissemination, and research evaluation activities. Michelle’s professional experience spans over 25 years of experience in education, research, government affairs and community engagement in Indian Country.

Miranda Willis  
*Accreditation Coordinator, Chickasaw Nation*

Miranda Willis is a member of the Chickasaw Nation. In 2014, she graduated from East Central University with a Bachelor’s of Science degree in Environmental Health Science and is currently pursuing her Masters of Public Health degree at Creighton University. Miranda began working for the Chickasaw Nation Division of Research and Public Health in 2012 as an intern. She later served as the Strategic Prevention Data Analyst/ Tribal Liaison for the Partnerships for Success grant which focused on preventing underage drinking and prescription drug abuse/misuse in the Chickasaw Nation. Miranda currently serves as the Public Health Accreditation Coordinator.

LT Morgan Drew Greutman, Pharm.D., BCPS  
*Clinical Pharmacist, Choctaw Nation*

LT Morgan Greutman currently works as a clinical pharmacist at the Choctaw Nation and is the Project Director for a SAMHSA grant, Addressing Opioid Overdose Deaths in the Choctaw Nation. She began her career with the United States Public Health
Service and the Choctaw Nation as a pharmacy resident and in her residency she initiated an outpatient naloxone initiative as her primary project. At the end of the year 34 first responders were trained and carried naloxone. As a result of this project, LT Greutman was asked to train approximately 50 Bureau of Indian Affairs law enforcement officers in Oklahoma City, OK on opioid overdoses and naloxone use.

Omar Wyman
Ph.D. Candidate, Stephenson School of Biomedical Engineering, Stephenson Chair and Professor, University of Oklahoma

Omar is a Ph.D. student in the Translational Regenerative Medicine Lab studying under Dr. Michael Detamore to develop a regenerative temporomandibular joint. During his time at his undergraduate institution Texas A&M University, he worked as the Program Coordinator for the Aggie Research Program and connected teams of undergraduates with research opportunities and managing their research timelines. Omar is highly motivated to improve science outreach within OU community and hopes that his experience as an Undergraduate Research Ambassador at Texas A&M will serve as a strong foundation to develop unique and engaging outreach activities for students of all ages.

Paul Fragua
Manager, Ironside Consulting

Paul Fragua (Pueblo of Jemez) specializes in Tribal Community Development including strategic planning, master planning, resource development and technical assistance. Mr. Fragua’s focus is advancing tribal health care. During his term as Chairman of the Jemez Health Board the Tribe’s health center became AAAHC accredited tribal comprehensive Community Health Care Center. Mr. Fragua provides consulting services to HealthInsight. Additional health projects include: Fort Peck Tribes New Wellness Center, Pueblo of Santa Clara Health Center Strategic Plan, Pueblo of Jemez New Wellness Center, First Nations HealthSource Strategic Facilities Plan, Osage Nation Health Clinic, and Pueblo of Jemez Strategic Health Facilities Plan.

Paulina Deming, Pharm.D.
Associate Professor/Assistant Director Viral Hepatitis Programs, Project ECHO (Extension for Community Healthcare Outcomes)-University of New Mexico Health Sciences Center (UNM HSC)

Dr. Deming is a clinical pharmacist and associate professor at the UNMHSC College of pharmacy. Since 2006 she has worked with Project ECHO to improve the care of patients with chronic hepatitis C virus (HCV) infections in rural and underserved areas. In addition to her role as the assistant director for the viral hepatitis programs at ECHO, Dr. Deming is a faculty expert on HCV with multiple publications on HCV treatment and care.

Rachel Childers, Ph.D.
Assistant Professor, Stephenson School of Biomedical Engineering, Stephenson Chair and Professor, University of Oklahoma

Rachel Childers earned her Ph.D. in Biomedical Engineering from the Ohio State University, and joined OU in 2017, where she has created, developed, and implemented six biomedical engineering laboratory courses. She serves as the Chair of Undergraduate Studies in biomedical engineering, and taught a biomedical engineering course in France this past summer. Her outreach efforts with K-12 students has been featured in local newspapers and Oklahoma Channel 4 News, and the student team she led to 3D-print a hand for a 12-year-old boy with Poland Syndrome was featured on Oklahoma Channel 9 News.

Rob England, MA
Health Promotion Manager, United Indian Health Services

Rob England (Yurok), MA in Psychology, is the Health Promotion Manager in the Community Health and Wellness division for United Indian Health Services in Arcata, CA. He is a certified trainer of Question, Persuade, Refer (QPR), Applied Suicide Intervention Skills Training (ASIST) and Connect Suicide Postvention trainings. He is also a trained facilitator of the Gathering of Native Americans (GONA) curriculum. His previous experience includes thirteen years working for the Yurok Tribe in a variety of roles involving student’s education, enhancing cultural knowledge, and advocating for youth and families in the juvenile justice and child welfare systems.

Rodger Woeppe1
Therapeutic Supported Employment Services Program Manager, Veterans Health Administration

Mr. Woeppe1 is currently the Therapeutic Supported Employment Services Program Manager, the Domiciliary Care for Homeless Veterans Program Manager and CWTTR Program Manager at VA Black Hills Health Care System. He is responsible for all of VA Black Hills Vocational and Homeless Residential Treatment Programs throughout western South Dakota and parts of North Dakota and Nebraska. Previously Mr. Woeppe1 was in the U.S. Army and worked as a Mental Health Counselor in South Dakota. He graduated from Chadron State College with a Master of Arts degree in Mental Health and Community Agency Counseling. He is a Licensed Professional Counselor-Mental Health.

Samantha Jo McGee, BS
Project Coordinator, Choctaw Nation

Samantha McGee is the Project Coordinator for a SAMHSA grant, Addressing Opioid Overdose Deaths in the Choctaw Nation. Samantha obtained her bachelor’s degree in Criminal Justice and a minor in Psychology from the University of Arkansas at Fort Smith. She began her career with Oklahoma Treatment Services (OTS) in 2014 as a Substance Abuse Counselor. After working as a Substance Abuse Counselor for OTS, she was promoted to Program Administrator of their McAlester clinic in 2016. Samantha was named the secretary of the Oklahoma Association for the Treatment of Opioid Dependence (OKATOD) and is currently a board member.

Sarah Sullivan
Health Policy Analyst, Northwest Portland Area Indian Health Board

Sarah Sullivan is a Health Policy Analyst for the Northwest Portland Area Indian Health Board (NPAIHB) and the 43 tribes of Idaho, Oregon, and Washington. Sarah provides regulatory and advocacy on federal and state policies for the Northwest tribes. Prior to joining NPAIHB, Sarah worked for two years at the National Indian Health Board as the Policy Analyst and Policy Associate. She also worked on Capitol Hill for Representative Tim Bishop from Long Island, New York. Sarah’s passion and dedication to improve healthcare for tribal communities started when she was 16 years old through an internship opportunity at the Senate Committee on Indian Affairs under Senator John
McCain (R-AZ) and Senator Byron Dorgan (D-ND). Sarah obtained a Masters of Public Health (MPH) degree in policy and environmental health science as well as a Bachelor of Arts degree in political science from Indiana University.

› Shana Bakken
National Director, VHA Therapeutic and Supported Employment Services, Veteran Health Administration (VHA)

Dr. Bakken is the National Director of the Therapeutic and Supported Employment Services (TSES) in the Office of Mental Health and Suicide Prevention (OMHSP), Veterans Affairs (VA) Central Office. Dr. Bakken began her VA career in 1997 and since that time has held several clinical and leadership positions providing recovery-oriented services for Veterans before assuming her current position in VA Central Office in 2014. Dr. Bakken is a Licensed Psychologist and a Certified Rehabilitation Counselor, with degrees in Rehabilitation Psychology from the University of Wisconsin.

› Shawnna Ross
Public Health Nurse Supervisor, Chickasaw Nation

Shawnna Ross is a member of the Choctaw Nation of Oklahoma. Shawnna worked as a Licensed Practical Nurse for 12 years across the country. In 2006, Shawnna received her Bachelors of Science degree in Nursing from the University of Oklahoma; where she returned and received her Masters of Science of Nursing Administration in 2018. Shawnna has worked for the Chickasaw Nation Department of Health since 2006 and join the Division of Research and Public Health in 2015. Shawnna currently serves as the Public Health Nurse Supervisor.

› Sheri Daniels
Executive Director, Papa Ola Lokahi

Born, raised, and currently residing on Maui, Sheri-Ann Daniels, Ed.D, has over two decades of experience in social service programs and 15 years of supervisory experience, including non-profit management. In April 2016, Dr. Daniels was appointed Executive Director of Papa Ola Lokahi (POL). In this role, she leads efforts in developing policy strategies related to health improvement for Native Hawaiians and their families at the local, state and federal level. In 2017 Dr. Daniels was appointed chairperson of Nā Limahana o Lonopihā, the Native Hawaiian Health Consortium.

› Shervin Aazami
Public Health Project Coordinator, National Indian Health Board

Shervin Aazami is a Public Health Project Coordinator on the Public Health Policy and Programs team. His work is primarily focused on addressing the opioid overdose epidemic and HIV prevention in Tribal communities, while also providing research and analysis towards expanding Tribal food sovereignty. Prior to NIHB, Mr. Aazami worked at the Washington D.C. Department of Health as the HIV Screening Coordinator. Mr. Aazami graduated from the University of California, Los Angeles with his B.A. in Psychology, and is currently pursuing his Masters in Public Health with a concentration in Health Policy at George Washington University, and his Masters in Public Administration with a concentration in Local Government from the University of North Carolina, Chapel Hill.

› Shondra McCage
Diabetes Care Center Program Manager, Chickasaw Nation Department of Health

Shondra McCage is a citizen of the Chickasaw Nation and has worked for the Chickasaw Nation’s diabetes program for over 19 years. She graduated from East Central University in 1998 with a degree in Exercise Science; in 2005 she received her Master of Public Health from the University of Oklahoma’s Health Science Center and is currently a student in the College of Public Health’s doctoral program. She is a Master Certified Health Education Specialist. Shondra serves as the chair for the American Diabetes Association’s American Indian/Alaska Native Diabetes Action Council and is a commissioner with the Oklahoma Commission on the Status of Women.

› Sonlatsa Jim-Martin
Founder, Indigenous Youth Leadership Program, Inc.

Sonlatsa Jim-Martin is of the Sleeping Rock Clan and born for the Modoc Tribe. Her maternal grandfather is of the Salt Clan. She received her Bachelor’s Degree from the Colorado College and is working on a Master’s Degree in Public Administration/Public Health. Her past experiences include working with Indian Education, Tribal Human Resources, Navajo Nation Social Services, Non-Profit Organizations, Navajo Department of Health, and the Partners In Health COPE Program. She founded the Indigenous Youth Leadership Program, Inc. to advocate for the reform of systems to promote healthier foods and beverages through youth activism. Sonlatsa is a wife and mother, an Indigenous woman leader, an indigenous food grower, and a social justice activist.

› Stephanie Birdwell
Director, Office of Tribal Government Relations, Veterans Affairs Central Office, Washington DC

Stephanie has twenty years of experience working in Indian Affairs. She began her federal career as a social worker with the Bureau of Indian Affairs, Northern Pueblo Agency in NM. Ms. Birdwell moved on from the agency social service program to serve as the BIA southwest regional social worker and BIA Division Chief, human services at the HQ level. Stephanie earned her Master’ Degree in Social Welfare from the University of California at Berkeley and her Bachelor’ Degree in Journalism from the University of Oklahoma. She is an enrolled member of the Cherokee Nation in Oklahoma, and is a mother.
Congressman Tom Cole  
**U.S. House of Representatives, 4th District, Oklahoma**

Currently serving in his eighth term in Congress, Tom Cole was elected to the U.S. House of Representatives in 2002. In 2017, Cole was inducted into the Oklahoma Hall of Fame. He is considered the foremost expert in the House on issues dealing with Native Americans and Tribal governments. The Congressman, one of only two American Indians in Congress, has been a champion for Indian Country throughout his career. He is a visionary leader in the U.S. Congress when it comes to ensuring that the federal government meets its trust responsibility to American Indians and Alaska Natives (AI/ANs). As a senior member of the House Appropriations Committee, Cole has been instrumental in securing funding for all of Indian Country by constantly advocating on behalf of the Tribes and educating his colleagues about the federal trust responsibility to Tribes. Outside of the Appropriations Committee he serves as the Co-Chair of the Congressional Native American Caucus and in that role he works to ensure that the federal government honors its promises to American Indians and Alaska Natives in all legislation considered by Congress. Tom Cole has a significant background of service to his home state of Oklahoma, serving various roles within the Republican Party as a state senator and as Oklahoma Secretary of State. A former college instructor in history and politics, Cole holds a B.A. from Grinnell College, a M.A. from Yale University and a Ph.D. from the University of Oklahoma. Tom Cole is a fifth generation Oklahoman and an enrolled member of the Chickasaw Nation. He was inducted into the Chickasaw Hall of Fame in 2004. He was inducted into the Oklahoma Hall of Fame in 2017.

Trina Jones Artis  
**Papa Ola Lokahi**

Born and raised in the Pacific Northwest, Trina Jones Artis relocated to Hawai‘i in 2013 earning a master’s degree in social work from University of Hawai‘i at Mānoa in 2016 and is currently in her final semester in the Native Hawaiian and Indigenous Health, Masters in Public Health program. She currently serves as the Data and Research Assistant for Papa Ola Lokahi in addition to the project coordinator for the Hawai‘i Youth Services Directory/808youth.com. She joined POL following the completion of her NIH-MPH practicum, which focused on collecting and analyzing data from the community voices survey.

Zunneh-bah Martin  
**Youth Board Member, Indigenous Youth Leadership Program, Inc.**

Zunneh-bah is Diné (Navajo), Modoc, Mexican with Aztec and Mayan ancestry, African American, Irish and German. Her name is a Traditional Diné/Navajo name and is translated to “old and wise woman warrior.” Zunneh-bah was selected to represent the Navajo Nation as a Youth Delegate for NIHBP’s Conference in 2014. Currently she is attending the Colorado College in Colorado Springs, majoring in Southwest Studies with an emphasis in Film Studies and Indigenous Studies. Zunneh-bah is an original member of “Generation Indigenous” under the Obama Administration. She is also a board member of La Casa Roja, a global indigenous youth leadership organization and is a founding board member of the Indigenous Youth Leadership Program, Inc.
HOST HOTEL AND CONVENTION CENTER FLOOR PLAN

COX CONVENTION CENTER & RENAISSANCE
Oklahoma City Convention Center Hotel
HOW TO MAKE THIS CONFERENCE A HEALTHY CONFERENCE

NIHB acknowledges how important it is to be active and stay healthy. For this reason, we have taken steps to make this year’s National Tribal Health Conference a little healthier. We have created an agenda that will facilitate healthy options for participants, as well as provide them the time they need to engage in their own fitness activities.

NIHB is sponsoring two fitness events during this year’s National Tribal Health Conference. The first will be on Tuesday morning at 6:30am and the second will be on Wednesday morning at 6:30am. Please see the flyer in the conference bag for more detailed information.

The agenda has been specially constructed so as to not start too early and to not finish too late. This provides participants the time that they need to not just adjust to the Central Time zone, but also exercise in the morning or the evening, as well as get a good night’s sleep.

NIHB has adopted a practice of offering longer breaks during our conferences. So please take advantage of the 30 minute morning and afternoon breaks to walk around, visit the exhibitors and vendors, stretch the legs, or even go outside for a walk.

NIHB is encouraging participants to leave the host hotel during the lunch breaks to explore downtown Oklahoma City. We hope that participants will get out and walk to the wonderful eating establishments in the surrounding areas. A list of restaurants in the area was in the conference bag.

NETWORK WITH COLLEAGUES

One of the reasons we all go to conferences is to be able to meet new colleagues, make new professional relationships and strengthen existing ones. NIHB has constructed an agenda that should help you do just this.

The longer breaks between sessions and the open lunch periods will allow for valuable networking time. It is okay if you need to check e-mail or make a phone call, but remember that this time can also be used to set up meetings and explore new collaborative opportunities.

- Longer workshop times encourage interactive activities and facilitated discussion as an integral part of the learning process. Please do not be afraid to ask questions, share stories, make comments, and comment on what you hear other participants say. This is what truly makes the Conference a rich experience. We can all learn from one another.

- NIHB has specifically set aside a room at the convention center to facilitate Tribal and federal partners’ meetings. If you have a need to reserve a room for an hour or less for a meeting, please visit the front desk to reserve a time slot in the Tribal and Federal Partner Meeting Room.

- Utilize the conference app to send a short message directly to other conference participants (even if you do not have their phone number) to ask questions, set up meetings, or comment on their presentations.

- NIHB is hosting or facilitating several evening events during this year’s National Tribal Health Conference (the opening reception, Culture Night, and the Heroes in Health Awards Gala). These are excellent opportunities to connect with old and new friends in a most laid back atmosphere.
FITNESS EVENT

Walk/Run
THURSDAY
Sept. 20, 2018
6:30-7:30 AM

Yoga
WEDNESDAY
Sept. 19, 2018
6:30-7:30 AM

T-shirts for participates

SPONSORED BY
HOBBS STRAUS DEAN & WALKER

FOR MORE INFORMATION
Wendee Gardner
202-548-7297
wgardner@nihb.org
EXHIBIT HALL PASSPORT

Win a chance to be entered into a drawing for one of three grand prizes! NIHB will hold a drawing during the closing plenary session on Thursday, September 20, 2018, where three lucky winners will receive a special prize. Must be present to win.

DIRECTIONS:
Get a signature from each of the exhibitors in the NIHB Exhibit Hall and Marketplace listed here and return this page to the registration table by 11:00 am on Thursday, September 20, 2018. A drawing will be held during the closing plenary and you must be present to win.

Participant name and phone #

TRIBAL/FEDERAL GOVERNMENTS
Centers for Medicare & Medicaid Services
Office of Minority Health Resource Center
FDA Center for Tobacco Products
FDA/Office of Women’s Health
Kickapoo Behavioral Health
Kickapoo Tribal Health Center
Muscogee (Creek) Nation
National Institutes of Health
Southcentral Foundation Nuka System of Care
U.S. EPA Indoor Environments Division

INFORMATION
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ANNUAL HEROES IN HEALTH

Awards Gala

EXPANDING THE HORIZON OF INDIAN HEALTH

WEDNESDAY, SEPTEMBER 19, 2018
6:00 PM - 9:00 PM

An event honoring national, regional, and local champions in Indian Health, featuring a meal prepared by “The Native Chef” Jason Champagne

DEVON ENERGY BUILDING
VAST, 50TH FLOOR
333 WEST SHERIDAN AVENUE
OKLAHOMA CITY, OKLAHOMA

TICKETS $75 EACH
TABLE OF EIGHT $500

FOR MORE INFORMATION
JENNIFER VIGARIO
JVIGARIO@NIHB.ORG