Hope for Mental Health, Substance Abuse, and Addiction Recovery in Indian Country
Hope

for

Mental Health, Substance Abuse, and Addiction Recovery in Indian Country

National Indian Health Board

24th Annual Consumer Conference

September 24-28, 2007
DoubleTree Hotel - Lloyd Center • Portland Oregon

www.nihb.org
HIGHLIGHTS

- Best Practices for Improving AI/AN Access to Medicare and Medicaid
- My Health, My Community Video
- Access & Reimbursement for Mental Health and Substance Abuse Services
- CMS Tribal Technical Advisory Group (TTAG)
- Long Term Care and Elder Care
- Medicare and Medicaid Basics
National Indian Health Board

24th Annual Consumer Conference

Hope for Mental Health, Substance Abuse, and Addiction Recovery in Indian Country
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FROM THE CHAIRMAN
NATIONAL INDIAN HEALTH BOARD

September 2007

Welcome Friends, Colleagues and Supporters!

On behalf of the National Indian Health Board’s (NIHB) Board of Directors and staff, welcome to the 2007 NIHB Annual Consumer Conference and welcome to Portland! Joining us as the Host Area for this event is the Northwest Portland Area Indian Health Board (NPAIH) and we wish to personally thank the Tribes, Board and staff of the NPAIH for their hospitality, enthusiastic work and generous support toward making the 2007 NIHB Consumer Conference a success.

This year NIHB is celebrating its 35th year anniversary and has identified the theme of HOPE for this conference for many reasons. As we reflect on our 35 years of service to Indian Country, HOPE so simply encapsulates the purpose for which the Tribes of this Nation founded the National Indian Health Board. H.O.P.E. can also serve as a clever acronym for Healing Our People Everywhere – and together with one Tribal voice for American Indian and Alaska Native health - that is, in its simplest form, the mission of NIHB. On Wednesday night, we have planned a very special Culture Night and 35th Anniversary Gala where we will celebrate NIHB@35. It is also the 35th Anniversary of the NPAIH and we will celebrate our joint milestone as well as the rich and generous cultures of the NPAIH’s 43 Tribes – please join us.

The theme of Hope for Mental Health, Substance Abuse and Addiction Recovery in Indian Country also speaks to the heart of illnesses that impact not only individuals, but, our families and our communities. More than 120 speakers representing many Tribes, organizations, federal agencies and others will provide information about programs that work and possibilities and opportunities that you can take home with you. We are so appreciative to all of them for offering to share their knowledge. We also will have a special event sponsored by the Nike Corporation, featuring an exciting announcement, a fitness activity and remarks by noted American Indian athlete Notah Begay and Nike champion for American Indian fitness, Sam McCracken.

Finally, the greatest feature of this conference is YOU! Thank you for registering for and attending the 2007 NIHB Annual Consumer Conference, and for being sponsors, vendors and speakers. As the only national organization solely dedicated to the improvement of health care for all American Indians and Alaska Natives, your support for this conference is critical to the advancement of our mission.

As 19th Century author, Orison Marden wrote, “There is no medicine like hope, no incentive so great, and no tonic so powerful as the expectation of something tomorrow.” We trust that you will leave this conference inspired and ready to face tomorrow filled with HOPE.

Enjoy the Conference,

Yours in Health,

H. Sally Smith
Chairman
NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD
EXECUTIVE BOARD OF DIRECTORS

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Pearl Capoeman-Baller
Sergeant-at-Arms
Quinault Nation
September 24, 2007

Dear NIHB Conference Attendees:

On behalf of the Northwest Portland Area Indian Health Board, I am honored to welcome you to Portland and the National Indian Health Board's (NIHB) 35th Annual Consumer Conference. Northwest Tribes are pleased to have you as our guests and look forward to working with you and in the coming days on important Indian health issues.

This year’s conference marks some important milestones. It was in 1972 that Tribal leaders recognized the need for a national voice on Indian health matters by creating the National Indian Health Board. For 35 years, NIHB has played a major role in advocating for the health needs of our Indian people. NIHB provides a vehicle to keep the flow of health care information in front of policy makers and Tribal governments. Northwest Tribes understand the importance of having a national voice and we look forward to supporting NIHB for another 35 years!

I also note that during this conference National American Indian Day will be celebrated on September 28th and our local Portland community looks forward to sharing in your cultural night activities. It’s important that we all recognize the contributions, culture, and history that our American Indians and Alaskan Native people have given this Country.

This conference agenda is especially important to me. The conference theme, “Hope 2007,” promises to bring new awareness and initiatives for mental health issues, substance abuse, and addiction recovery throughout Indian Country. I am strongly committed to these issues and commend NIHB for their attention to these issues.

While you are meeting, I note that our organization, the Northwest Portland Area Indian Health Board, is also celebrating its 35th year working for the betterment of health of American Indians and Alaska Natives living in the Pacific Northwest.

Throughout your conference, we will have an important opportunity to meet with other health professionals and policy leaders to gather important information and insight into the best ways to address health concerns facing American Indians and Alaska Natives. I am certain that you will have an informative and challenging meeting. I hope that you will leave energized and ready to continue to pursue the good work you do for all of our tribes.

Sincerely,

[Signature]

Linda Holt, Chairperson
Northwest Portland Area Indian Health Board
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WHAT IS THE NATIONAL INDIAN HEALTH BOARD?

Our Vision

The National Indian Health Board

advocates on behalf of all Tribal Governments, American Indians and Alaska Natives in their efforts to provide quality health care for ALL Indian People!

What is the National Indian Health Board

The National Indian Health Board (NIHB) is a 501(c)3 not for profit, charitable organization providing health care advocacy services, facilitates tribal budget consultation and provides timely information and other services to all Tribal Governments. Whether Tribes operate their own health care delivery systems through contracting and compacting or receive health care directly from the Indian Health Service (IHS) NIHB is their advocate.

NIHB also conducts research, provides policy analysis, program assessment and development, national and regional meeting planning, training, technical assistance programs and project management. These services are provided to tribes, Area Health Boards, tribal organizations, federal agencies, and private foundations. The NIHB presents the tribal perspective while monitoring, reporting on and responding to federal legislation and regulations. It also serves as a conduit to open opportunities for the advancement of American Indian and Alaska Native health care with other national and international organizations, foundations, corporations and others in its quest to build support for, and to advance, Indian health care issues.

Raising Awareness

Elevating the visibility of Indian health care issues has been a struggle shared by tribal governments, the federal government and private agencies. For 35 years, the NIHB has continuously played a central role in focusing national attention on Indian health care needs. These efforts continue to gain results.

Since 1972, the NIHB has advised the U.S. Congress, IHS, other federal agencies and private foundations about health disparities and service issues experienced in Indian Country.

The future of health care for American Indians and Alaska Natives is intertwined with policy decisions at the federal level and changes in mainstream health care management. The NIHB brings to tribal governments timely information to assist tribes to effectively make sound health care policy decisions.

Our Board of Directors

Because the NIHB represents all federally-recognized tribes, it is important that the work of the NIHB reflect the unity and diversity of tribal values and opinions in an accurate, fair, and culturally-sensitive manner. This objective is accomplished through the work of the NIHB Board of Directors and Area Health Boards. The NIHB is governed by a Board of Directors consisting of representatives from each of the twelve IHS Areas. Each Area 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 Board of Directors elects an Executive Committee comprised of a Chairman, Vice-Chairman, Treasurer, Secretary, and Member-at-Large, who serve two-year appointments with staggered terms. The Board of Directors meets quarterly.
September 24, 2007

National Indian Health Board
101 Constitution Ave. NW, Suite 8-B02
Washington, DC 20001

I am writing to welcome you to Oregon for the National Indian Health Board’s (NIHB) 24th Annual Consumer Conference. Congratulate on your 35th anniversary!

The NIHB has played a major role in focusing attention on Indian health care needs over the last 35-years. Elevating the visibility of Indian health care issues remains a struggle shared by tribal governments, the states, the federal government and private agencies.

I share your commitment to improving the health status of native people and all Americans. Many racial and ethnic communities in America, particularly our American Indian and Alaskan Native populations, are disproportionately impacted by health concerns that are not adequately addressed by the current health systems in our country. I also share your belief in the importance of reauthorization of the Indian Health Care Improvement Act.

Thank you for the important work you do and welcome to Oregon. I hope your conference is successful and that you enjoy your stay.

Sincerely,

THEODORE R. KULONGOSKI
Governor

TRK:der:mh
September 2007

Dear Friends:

On behalf of the residents of the City of Portland, I welcome the 24th Annual National Indian Health Board’s Conference, to the “City of Roses.”

I would like to thank you for visiting our city. Portland’s residents and visitors know our city as one of the most livable in the world. To me, that means Portland is a model of progressive urban planning, home to an array of cultural and recreational opportunities, and a vibrant, lively community of families and hard-working individuals. Most importantly, though, our city and region are committed to cultural diversity and acceptance, which is why many people are choosing to visit, work, and live in Portland. I am proud of this reputation and hope that you will have time to experience some of the things that make our city so great – whether it’s a fine meal at one of our renowned local restaurants, a hike through Forest Park, or an evening of spectacular performance at one of our celebrated theaters. I hope that your busy schedule will allow you to take advantage of the entertainment and beauty that our city has to offer.

We are honored to have you as a guest in our fine city. Best wishes for a most successful convention. Please enjoy your “Hope: For Mental Health, Substance Abuse, and Addiction Recovery in Indian County” conference and your visit, and let us know about your experience!

Sincerely,

Tom Potter
Mayor
Dear Friends:

I want to take this opportunity to welcome the National Indian Health Board to the beautiful state of Oregon. I believe you will find the scenic attractions, restaurants and recreational activities that Oregon has to offer to be the finest in this country and will serve to make your conference a success.

I want to commend the National Indian Health Board and its Board of Directors for selecting this year’s conference theme, “Hope for Mental Health, Substance Abuse, and Addiction Recovery in Indian Country.” Your agenda organized around this theme will work to address challenges to the significant health disparities that American Indian and Alaska Native people face. American Indian and Alaska Native people disproportionately suffer from mental health disorders. That is why I wrote the Garrett Lee Smith Memorial Act to specifically include tribes as eligible to receive grants to address youth depression and suicide. Currently, 30 states, six tribes and 55 colleges and universities have received funds to develop suicide prevention and intervention programs to help alleviate the suicide epidemic. As a parent who lost a child to mental illness, these issues are very important to me. I look forward to working with you to implement your solutions and wish you a very successful meeting.

Finally, I want to extend my congratulations to the National Indian Health Board on their 35th Anniversary and the remarkable job they do advocating to improve the health care needs of American Indian and Alaska Native people.

Warm Regards,

Gordon H. Smith
September 24, 2007

Dear National Indian Health Board Conference Attendees:

Welcome to Portland, Oregon for the 2007 Annual National Indian Health Board Consumer Conference! As this year’s conference begins, I hope it is productive for all those who attend.

I am delighted the Northwest Portland Area Indian Health Board is hosting this year’s conference. They have been instrumental in advancing health care for Indian Country in the Northwest and are located in the First Congressional District of Oregon, which I represent.

This conference presents many opportunities for health professionals and policy leaders to gather and discuss emerging trends, best practices and how to best address health issues currently facing Indian Country. As a strong advocate for improving health care, I think this conference serves an important purpose.

Again, I welcome everyone to this year’s conference and hope it is enjoyable and insightful for all.

With warm regards,

David Wu
Member of Congress

DW:dfw
Dear Friends,

This letter is to welcome all of you to the National Indian Health Board’s 24th Annual Consumer Conference, and to congratulate you on your commitment to providing quality health care to American Indians and Alaska Natives. I regret that I am unable to attend, because “HOPE for Mental Health and Substance Abuse in Indian Country” is an important, timely topic, and finally honoring the federal government’s moral and legal obligations to First Americans will be a priority in my administration.

Tribal communities face a unique set of challenges, and recognizing the inherent sovereignty of tribes is not enough. We must also help build tribal nations by adequately funding much-needed programs. I don’t need to tell you that the state of Nevada has gone without a single Indian Health Services (IHS) hospital since 1985, and that federal per-capita spending for Indian health care amounts to about half of federal per-capita spending for prisoners’ health care. Such conditions do not bespeak a commitment to tribal nation-building.

I am proud to be an original co-sponsor of S. 1200, the Indian Health Care Improvement Act Amendments of 2007. This long overdue legislation will modernize Indian health care services and delivery, make it easier for tribes and the IHS to attract quality health care professionals, and will provide tribal health programs with more flexibility to ensure that funds are used to meet the specific needs of their community. Additionally, the universal health care coverage plan I am proposing will allow American Indians to utilize non-IHS health care providers throughout the nation. We must also address jurisdictional conflicts so that tribes can protect women from non-Indian abusers and shield their communities from the scourge of methamphetamine.

The National Indian Health Board is an indispensable advocate for change, fighting to expand access to quality health coverage and raise awareness of the health inequalities that burden tribal communities. We still have a long way to go, and that’s why I admire the work that you are doing here today. I commend you on your efforts to rekindle hope in your communities, and I look forward to working with you in the months and years ahead.

Sincerely,

Barack Obama
Ms. H. Sally Smith  
Chairman  
NIHB  
101 Constitution Avenue, NW  
Washington, DC 20001  

Dear Friends:  

I send my greetings and appreciation to the National Indian Health Board and wish you a successful conference. I further send my congratulations on 35 years of hard work and dedication to improving access to, and the quality of, health care for American Indians and Alaska Natives. Though we still have a long way to go, access and quality health care have improved since the inception of the NIHB.  

I am pleased you have chosen the theme of your 2007 conference to be "Hope; For Mental Health, Substance Abuse, and Addiction in Indian Country." Far too often substance abuse and addiction recovery are pushed aside for issues of law enforcement and punishment. Sending an addict through the judicial system rarely results in a sober or drug free individual. Success is found when the individual makes the decision to stop the addictive behavior and has the hope that, with help, he or she will succeed.  

Given this, the importance of the reauthorization of the Indian Health Care Improvement Act cannot be understated. After holding a hearing in March, I am proud to inform you that the first Indian legislation reported from the Natural Resources Committee was the Indian Health Care Improvement Act. I am committed to seeing final passage of this important legislation this Congress and will continue working with the Leadership to ensure timely passage.  

With warm regard, I am  

Sincerely,  

NICK J. RAHALL, II  
Member of Congress  

NJR/amr
H. Sally Smith  
Chairman  
National Indian Health Board  
101 Constitution Ave NW, Suite 8-B02  
Washington, DC 20001

Dear Friends:

Thank you for inviting me to participate in the National Indian Health Board’s 24th annual national conference. Although I am unable to attend, I am delighted to send my greeting to all of you.

First, I want to congratulate the National Indian Health Board on its 35th Anniversary. Your tireless advocacy has helped achieve important improvements in the delivery of health care to thousands of American Indians and Alaska Natives.

The theme for this year’s conference, “Hope: For Mental Health, Substance Abuse, and Addiction Recovery in Indian Country,” is an important area of focus. Mental health services, in particular, are a vital part of primary health care. That is why I support programs like INPSYCH, which provides training for American Indians in clinical psychology, mental health outreach services, and legislation to incorporate telemental health in helping Indian youth.

I wish you all the best for a successful conference and look forward to our continued cooperation as we work to improve health care for American Indians and Alaska Natives.

Sincerely,

KENT CONRAD  
United States Senate
August 31, 2007

Ms. H. Sally Smith
Chairman
National Indian Health Board
101 Constitution Ave, N.W., Suite 8-B02
Washington, DC 20001

Dear Ms. Smith:

I would like to extend my warmest greetings to all who are able to attend the 24th Annual Consumer Conference of the National Indian Health Board in Portland, Oregon. I would also like to express my regret for not attending this important Conference, particularly in light of the Indian Health issues facing the first inhabitants of this country.

As you are aware, we will be marking up the Indian Health Care Improvement Act on September 12, 2007. Last year we were able to get this important legislation out of Committee by a unanimous voice vote. We are hopeful we can replicate last year’s vote.

Finally, one of the reasons it has taken longer to get to the Indian Health Care Improvement Act was due to our work in getting the Children Health Insurance Program (CHIP) passed. One of the provisions of this legislation sets aside $10 million specifically for Native American children for outreach and enrollment. In addition to this $10 million there is $80 million in grants for outreach and enrollment for rural areas with high rates of eligible but not enrolled children. Among the entities eligible to receive this additional grant money include Indian Tribes or Tribal organizations.

I recently visited the Confederated Salish-Kootenai Tribe on the Flathead Reservation in Pablo, Montana. Among the issues we discussed included the Indian Health Care Improvement Act and other health-related issues. I am committed to enhancing the medical care for Native Americans in Montana and throughout the United States. One only has to visit this country’s reservations to see the urgent need that exists. No longer can we sit back and say a Tribal member cannot get sick after June of any given year because there is no health care available unless it involves life and/or limb.

Congratulations on your Consumer Conference and I look forward to working with the National Indian Health Board in the future to solve these problems and bring better health care to the urban clinics and reservations.

Sincerely,

Max Baucus
As Vice Chairman of the Senate Committee on Indian Affairs, and as a member of the Senate’s Health, Education, Labor and Pensions Committee, it is my mission to help the Indian Health Service and our tribal health providers secure the resources they need to reverse the health disparities that disproportionately affect our Native communities.

In Washington, we focus on legislation like the Indian Health Care Improvement Act and reauthorization of the Substance Abuse and Mental Health Services Administration’s programs as a way to make things better. I am proud to be involved in both efforts.

As important as this legislation is for the health of our Native people, it is but one piece of the picture. The federal government can and must do a better job in providing resources and support for Native health programs. But government alone can’t make our Native communities safe and healthy.

It takes a partnership of tribal leadership, Native people and health professionals to make it happen. There is much more that we can do to promote healthy lifestyles within our Native communities when we come together to do something about things. We can put an end to Fetal Alcohol Syndrome and the spectrum of related disorders if women choose not to consume alcohol during their pregnancy.

The Athabascan peoples of Interior Alaska use the word “Daaga'” – “Get Up and Do Something” - as a rallying cry to engage their Native villages in promoting sobriety and healthy lifestyles. This 24th Annual Consumer Conference is focused on just that. The theme is a bold plan to improve the mental health, substance abuse and addiction recovery conditions in our communities. This conference could not occur at a better time as we address the new challenges of methamphetamine while continuing to battle the old demons.

I hope that you will leave Portland with a renewed sense of hope and inspiration. More importantly, I hope that you will put what you have learned to work in your own communities. Daaga'!

Respectfully,

Lisa Murkowski
United States Senator
September 7, 2007

National Indian Health Board
101 Constitution Ave. NW, Suite 8-B02
Washington, DC 20001

Dear Attendees,

I would like to heartily extend my personal greetings as you attend the National Indian Health Board’s 24th national conference. It is an inspiration to know that tribal leaders, federal representatives, health providers and others from across Indian Country are working together to promote the health of American Indians and Alaska Natives. I support your efforts and wish you the very best of luck.

Sincerely,

Joe Barton
Member of Congress
H. Sally Smith  
Chairman  
Alaska Area Representative  
National Indian Health Board  
101 Constitution Ave. NW, Suite 8-B02  
Washington, D.C. 20001  

Dear NIHB Conference Attendees:

It is an honor and a privilege to welcome you to the 24th Annual National Indian Health Board Consumer Conference. The health of our Nation has always been one of my top priorities and it makes me very proud to see the growth and the dedication exhibited by the Indian Health Service (IHS) with each coming year.

The theme of this year’s conference is, “Hope: For Mental Health, Substance Abuse, and Addiction Recovery in Indian Country.” I think we can all appreciate this message because while it may highlight some of the terrible afflictions that face individuals in our communities, its focus is on hope; hope that with the collective efforts of dedicated individuals, we can overcome such debilitating diseases and look forward to a healthier, happier tomorrow.

In pursuit of such a day, this year I helped introduce H.R. 1328, the Indian Health Care Improvement Act Amendments of 2007. I believe that this bill will further enable institutions such as the IHS and other Native health care providers, to continue and expand upon their invaluable work enhancing the health of our Native communities. This bill will include such provisions as a Family in Youth Treatment Program, a Multidrug Abuse Program, an Indian Youth Telemental Health Demonstration Project, Behavioral Health Programs, and training and community education among many others.

It is critical that we continue to work for and improve the health of our Native communities, and while doing so, appreciate the contributions of institutions such as the NHIB, a board which facilitates vital improvements to the well being of Natives across the country. Although I regretfully could not attend the conference in person, please be assured that everyday I spend at work is a day working with you, to improve the health of our Nations American Indians and Alaskan Natives.

Sincerely,

DON YOUNG  
Congressman For All Alaska
Dear Friends,

Greetings to everyone gathered at the National Indian Health Board’s 24th Annual Consumer Conference. Your theme, “Hope: For Mental Health, Substance Abuse and Addiction Recovery in Indian Country,” is both timely and pertinent to the most pressing needs among Native Americans.

Passage of the Indian Health Care Improvement Act (H.R. 1328) is among my highest priorities as chairman of the House Energy and Commerce Subcommittee on Health and vice-chair of the Congressional Native American Caucus. In June, our subcommittee held a legislative hearing on H.R. 1328, which I introduced on March 6.

The bill will address many of the inequities that have caused disparities between health care on tribal lands and that in the rest of the country. It will help bring the system up to date and incorporate modern approaches to the practice of medicine, including the establishment of behavioral approaches to addressing the needs of our Native American families. These approaches are aimed at solving the very problems you are focusing on this week.

Enactment of IHCIA will be the result of a team effort. Those gathered this week in Portland will deserve much of the credit. Thank you for all you have done, and continue to do, to address the pressing health care needs of the first Americans.

Sincerely,

FRANK PALLONE, JR.
Member of Congress
September 7, 2007

Ms. H. Sally Smith
Chairman
National Indian Health Board
101 Constitution Avenue, NW
Washington, DC 20001

Dear Chairman Smith,

I send my respect and warmest wishes to all of you at the National Indian Health Board’s 24th Annual Consumer Conference in Portland, Oregon. I’m sure that the conference theme of “Hope: For Mental Health, Substance Abuse, and Addiction Recovery in Indian Country” will encourage greater understanding of important issues such as suicide prevention, alcohol recovery, diabetes treatment and prevention.

As you know, American Indians and Alaska Natives continue to suffer significant disparities in health. One of our priorities as a nation must be achieving genuine parity between health care for Native Americans and the care available to other Americans. A continuum of care can and should be established through integrated behavioral health programs including both prevention and treatment – relating to alcohol and substance abuse problems, social services, and mental health needs of Native Americans.

I have long supported the efforts of Senator Byron Dorgan and Senator John McCain to increase funds for culturally accessible and affordable health care. Earlier this year, the Senate Indian Affairs Committee approved legislation to revise and extend The Indian Health Care Improvement Act. New provisions in that legislation will provide needed resources to address the lack of access to health care services in many tribal communities, and additional funding for these communities to intervene and prevent youth suicide. I believe that all our citizens should have the same opportunity to care for their mental health and physical health, and I will continue to fight in Congress for mental health parity and a strong federal infrastructure to deal with substance abuse and addiction issues.

Until every American Indian and Alaskan Native receives first class health care, we will never give up the fight in Congress. Thank you for all you do so well to bring better health care to our nation’s first Americans, and I wish you a very successful conference.

With respect and best regards,

Sincerely,

Ted Kennedy
Senator Edward M. Kennedy
Come to the 25th Annual NIHB Consumer Conference in California! September 22-26, 2008

See You There!
Albuquerque Area Indian Health Board
The Albuquerque Area Indian Health Board, Inc. (AAIHB) advocates on behalf of American Indians through the delivery of quality health care services, which honor spiritual and cultural values. AAIHB is a nonprofit organization, 100 percent Indian-owned and operated, serving tribal communities in New Mexico and southern Colorado. We provide specialized health services including clinical Audiology and HIV/AIDS prevention education, as well as advocacy, training, and technical assistance. Some of our innovative capacity building programs are in the areas of breast and cervical cancer awareness.

BIO (Biotechnology) - Washington, DC
Biotechnology researchers expand the boundaries of science to benefit mankind by providing better healthcare, enhanced agriculture, and a cleaner and safer environment. The mission of BIO is to be the champion of biotechnology and the advocate for its member organizations -both large and small.

Centers for Medicare & Medicaid Services - Baltimore, MD
The Centers for Medicare & Medicaid Services (CMS) is a Federal agency within the U.S. Department of Health and Human Services. CMS's mission is to assure health care security for beneficiaries. In serving beneficiaries, CMS opens their programs to full partnership with the entire health community to improve quality and efficiency in an evolving health care system.

Davis Wright Tremaine, LLP
DWT's practice is as diverse as it is sophisticated, offering a range and scope of experience few other law firms can match. With more than 400 attorneys involved in virtually every specialty area of the law, we represent a single, powerful industry-focused resource for dealing with the host of interrelated legal issues businesses face today. For in-depth information on specific services or to communicate directly with an attorney who can address your particular challenge, simply select the most appropriate practice area.

The Confederated Tribes of Siletz
This federally recognized tribe is a confederation of 27 bands originating from Northern California to Southern Washington. Termination was imposed on the Siletz by the United States government in 1955. In November 1977, the Siletz was the first tribe in Oregon and the second in the US to be fully restored to federal recognition. The Siletz occupy and manage a 3,666 acre reservation in Lincoln County, Oregon. The Siletz manages its resources of water, timber, and fish.

Kaufman and Associates, Inc.
Founded in 1990 and specializing in public health, education and economic development issues, KAI does work that matters. Kaufman and Associates, Inc. offers management support, research and evaluation, communications, and information technology services to federal, tribal, state, and regional governments, associations, foundations, and private-sector businesses.

Mashantucket Pequot Tribal Nation
The symbol of the Mashantucket Pequot Tribal Nation is a reflection of the past. The tree, perched on a rocky knoll and framed against a clear sky, represents Mashantucket, the "much wooded land" where the people hunted and prospered.

Mayo Clinic – Spirit of EAGLE Program
American Indian and Alaska Native (AI/AN) populations have very high incidence rates for specific cancer sites and poor survival rates for most cancers. This AI/AN Leadership Initiative on Cancer addresses comprehensive tribal cancer control through partnerships with The Network for Cancer Control Research among AI/AN populations, tribes, multiple cancer centers, Cancer Information Services (CIS), and the American Cancer Society (ACS). This Initiative will assist tribes to increase community awareness and understanding of cancer, provide training in cancer control research for AI/AN researchers, and improve native community channels to the National Cancer Institute (NCI) so that research can be specifically focused on issues that affect native people.
Navajo Nation
The Navajo Nation extends into the states of Utah, Arizona and New Mexico, over 27,000 square miles. The Navajo Nation is striving to sustain a viable economy for an ever increasing population that now surpasses 250,000.

Northwest Portland Area Indian Health Board
The Northwest Portland Area Indian Health Board (NPAIHB or Board) is a tribal organization comprised of the forty-three federally recognized tribes in Idaho, Oregon, and Washington. Formed in 1972, NPAIHB provides support in health promotion, disease prevention, health research, and legislative advocacy. NPAIHB’s mission is “to assist Northwest tribes to improve the health status and quality of life of member tribes and Indian people in their delivery of culturally appropriate and holistic health care.”

Substance Abuse and Mental Health Services Administration
Building resilience... Facilitating recovery... A life in the community for everyone
The Substance Abuse and Mental Health Services Administration (SAMHSA) has established a clear vision for its work – a life in the community for everyone. To realize this vision, the Agency has sharply focused its mission on building resilience and facilitating recovery for people with or at risk for mental or substance use disorders. SAMHSA is gearing all of its resources – programs, policies and grants – toward that outcome.

Suquamish Clearwater Casino Resort – Suquamish, WA
Suquamish Clearwater Casino Resort is a naturally breathtaking casino and hotel nestled among the pines and cedars of the scenic Kitsap Peninsula. This expansive, luxurious retreat offers four diamond amenities and a wide array of indoor and outdoor pleasures including a full-service spa, zero entry pool and of course, the endless excitement of video slots, blackjack, poker, craps, keno and roulette.

Tohono O’odham
The Tohono O’odham Nation is comparable in size to the state of Connecticut. Its four non-contiguous segments total more than 2.8 million acres at an elevation of 2,674 feet. Within its land the Nation has established an Industrial Park that is located near Tucson. Tenants of the Industrial Park include Caterpillar, the maker of heavy equipment; the Desert Diamond Casino, an enterprise of the Nation; and, a 23 acre foreign trade zone. The lands of the Nation are located within the Sonoran Desert in south central Arizona. The largest community, Sells, functions as the Nation’s capital.

United South & Eastern Tribes, Inc. - Nashville, TN
United South and Eastern Tribes, Inc. is a non-profit, inter-tribal organization that collectively represents its member Tribes at the regional and national level. USET has grown to include twenty-four federally recognized Tribes, and is dedicated to enhancing the development of Indian Tribes, to improving the capabilities of Tribal governments, and assisting the member Tribes and their governments in dealing effectively with public policy issues and in serving the broad needs of Indian people.

Virchow, Krause & Company, LLP - Employee Benefits
Virchow Krause provides employers and individuals with professional advice in employee benefits, risk management, and insured financial strategies.

Yellowhawk Tribal Health Center - Pendleton, Oregon
Yellowhawk Tribal Health Center, located approximately 6 miles from Pendleton, Oregon, provides outpatient health services to eligible American Indians living on, or visiting the Confederated Tribes of the Umatilla Indian Reservation (CTUIR).
# Workshops at a Glance

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<td>September 25</td>
<td>Morning Workshops</td>
<td>10:45 AM - 12:15 PM</td>
<td>Reducing Methamphetamine Use and Related Effects</td>
<td>Methamphetamine Abuse and Community Solutions</td>
<td>Sexually Transmitted Disease Risk Reduction Strategies</td>
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<td>Expanding Oral Health Services in Americaan Indian Communities</td>
<td>Diabetes Education in Tribal Schools Curriculum and Native American Child Health Advocacy</td>
<td>Native Youth School Health</td>
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<td>Accessing Federal Resources for Medical, Dental and Behavioral Health Needs</td>
<td>Cultural Awareness, Empowerment and Hip Hop for Reaching Today's Youth</td>
<td>Hopi Project to Address Dental Effects of Methamphetamine Use</td>
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<td>Getting Started with Medicare-like Rates</td>
<td>My Medicare, My Community</td>
<td>Options Available for Long Term Care and Elder Care in Indian Country</td>
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<td>3:15 - 4:45 PM</td>
<td>Getting to Know the Indian Health Service (IHS) Contract Health Service (CHS) Fiscal Intermediary (FI)</td>
<td>Understanding Medicaid</td>
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**September 28 is Public Health Day!**
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<td>Sexual Assault and Rape: A National, Native Strategy to Address Treatment Protocols</td>
<td>Sexuality, Stigma and Other Issues Relating to HIV</td>
<td>Building the Public Health Workforce</td>
<td>Substance Abuse Prevention</td>
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<td>Preventing and Managing Diabetes and Its Complications, including Cardiovascular Disease</td>
<td>Funding and Developing HIV/AIDS Programming</td>
<td>Accessing Promised Benefits: World Trade Center Recovery Workers and Veterans</td>
<td>Building the American Indian Physician Workforce</td>
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<td>Navigating as a Medicaid Provider</td>
<td>Access and Reimbursement: Medicaid Services for Mental Health, Substance Abuse, and Youth with Disabilities</td>
<td>Activities of CMS Tribal Technical Advisory Group</td>
<td>Best Practices in Developing State and Tribal Relations</td>
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<td>Navigating as a Medicare Provider</td>
<td>Navajo Nation Behavioral Health Transformation</td>
<td>Best Practices of Tribes Improving Enrollment in Medicaid</td>
<td>Best Practices in Outreach and Enrollment of AI/AN in Medicaid Programs</td>
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All Sessions will be held in the Lloyd Center Ballroom.
MONDAY SEPTEMBER 24, 2007

1:00 – 5:00 PM  Attendee Registration and Exhibitor Check-In
                Conference Lobby

6:00 – 8:00 PM  OPENING RECEPTION
                IN THE PACIFIC NORTHWEST BALLROOM
                ALL ARE INVITED!
                Hosted by the Tribes of the Northwest Portland Area Indian Health Board
TUESDAY, SEPTEMBER 25, 2007

6:30 - 7:00 AM  Fun Fitness Walk
Joe Law, BS
Health Promotion/Disease Prevention Coordinator
Portland Area Indian Health Service
Meet at Conference Lobby

7:00 - 8:30 AM  Continental Breakfast Provided By: Tohono O'odham Nation
Lloyd Center Ballroom

7:00 AM - 5:00 PM  Registration and Information Desk Open
Conference Lobby

7:00 AM - 5:00 PM  Reflection Space Open
Ross Island Room

8:00 AM - 5:00 PM  Exhibits Open

8:00 - 8:30 AM  Opening Ceremonies
Lloyd Center Ballroom

Posting of the Colors
Northwest Indian Veterans Association

Call to Order
H. Sally Smith
Chairman, NIHB Board of Directors
Chairman, Bristol Bay Area Health Corporation, Alaska

Invocation/Blessing
Julia Davis Wheeler
Nez Perce Tribal Council Member
Delegate, Northwest Portland Area Indian Health Board

8:30 - 9:00 AM  Welcome to the NIHB 24th Annual Consumer Conference and Introduction of the NIHB Board of Directors
H. Sally Smith
Chairman, NIHB Board of Directors

Welcome from the Northwest Portland Area Indian Health Board
Linda Holt
Member, NIHB Board of Directors
Council Member, Suquamish Tribe
Chairman, Northwest Portland Area Indian Health Board

Welcome and Introduction of NIHB Staff
Stacy Bohlen (Sault Ste. Marie Chippewa Tribe)
Executive Director, National Indian Health Board

9:00 - 9:15 AM  Opportunities and Hope: Overview of Substance Abuse and Mental Health Services Administration Day (SAMHSA)
Linda Holt
Member, NIHB Board of Directors
Eric Broderick, DDS, MPH
Rear Admiral, United States Public Health Service
Deputy Administrator, Substance Abuse and Mental Health Services Administration
United States Department of Health and Human Services

9:15 - 9:45 AM  Keynote Speaker: HOPE for Crystal Methamphetamine Recovery and Use Prevention
Joe García
President, National Congress of American Indians
Chairman, All Indian Pueblo Council
Governor of Ohkay Owingeh (San Juan Pueblo)
9:45 - 10:30 AM  
**Addressing Substance Abuse and Mental Health: Substance Abuse and Mental Health Services Administration (SAMHSA) and the United States Department of Health and Human Services (HHS) Office of Minority Health (OMH) Take Action in Indian Country**

Beverly Watts-Davis  
Senior Advisor for Substance Abuse  
Substance Abuse and Mental Health Services Administration  
United States Department of Health and Human Services

Mirtha Beadle, MPA  
Deputy Director, HHS Office of Minority Health  
Substance Abuse and Mental Health Services Administration  
United States Department of Health and Human Services

10:30 - 10:45 AM  
**The Aftermath of Suicide, One Father's Journey**

Spike Bighorn, MBA  
Former Chairman, Assiniboine and Sioux Tribes  
(Chairman Bighorn also will be conducting a workshop on this topic immediately following his presentation)

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**MORNING WORKSHOPS**

10:45 AM - 12:15 PM

### Hawthorne Room

**Reducing Methamphetamine Use and Related Effects**

This session will describe efforts in Indian Country to track and address methamphetamine abuse. Treatment service availability, referral and use by American Indians and Alaska Natives (AI/AN) and existing evidence of effective programs that work for Tribes will be covered. Presenters will describe the use of research partnerships to document the influence of a community on its drug enforcement policy and prevention programs, validating the need for substance abuse education in existing prevention programs.

**Methamphetamine Initiative**

Linda Frizzell, Ph.D. (Eastern Cherokee)  
Project Director, Northwest Portland Area Indian Health Board

**The Effects of Substance Abuse on the Heart: Do Drugs and Die**

Janeen Gray (Chickasaw)  
Program Manager, Choctaw Nation of Oklahoma Core Capacity Program

Joe Bray  
Statistician, Choctaw Nation of Oklahoma Core Capacity Program

### Sellwood Room

**Mental Health and Education Needs and Programs**

American Indian and Alaska Native (AI/AN) people do not access mental health services at a rate similar to the documented need for such treatment and support. This session will review the overall trends in such utilization including recent assessments of the mental health needs of tribes in Connecticut. New work from the Indian Health Service Behavioral Health Initiative to encourage development of programs will also be reviewed.

**Utilization of Mental Health Care Services by American Indian and Alaska Native (AI/AN) People**

Nathaniel Mills (Choctaw)  
Doctoral Student, Department of Counseling Psychology, Lehigh University, Massachusetts

**Native American’s Mental Health and Education Needs: Study of Tribes in Connecticut**

Felicia Wilkins-Turner, EdD (Lumbee)  
Principal Investigator  
Vocational Rehabilitation Research Program  
Mashantucket Pequot Tribal Nation
The Indian Health Service Behavioral Health Initiative
Bryan Wooden, LICSW, LCSW-C, DCSW
Deputy Director, Division of Behavioral Health
Indian Health Service

Three Sisters Room
Methamphetamine Abuse and Community Solutions
This presentation will discuss the epidemic of Methamphetamine and its impact on AI/AN. Individual health effects as well as the stress on the healthcare system will be reviewed. A community-driven and community-based project to address drugs in one tribal community will be shared to identify best practices and practical approaches to including traditional punishments into drug policy.

Epidemiology and Toxicology of Methamphetamine Abuse in Native Americans
Scott Phillips, MD
Associate Clinical Professor of Medicine, University of Colorado

Lummi Nation Community Mobilization Against Drugs Initiative
Darrell Hillaire (Lummi)
Coordinator, Lummi Nation Community Mobilization Against Drugs Initiative

Mc. Bachelor Room
Sexually Transmitted Disease Risk Reduction Strategies
This presentation will review two approaches to reducing risk behaviors in youth. The “Parents Speak Up, Share your Vision” project is a program to train parents about how to influence their children’s sexual development and promote resistance to drug use. This perspective has been paired with a project on reaching out directly to teens in at risk reduction and youth-driven social marketing campaign designed to reduce needle drug use and other high risk behaviors.

Native, Youth-Driven Social Marketing Campaign for HIV Prevention
Jay Macedo (Yurok/Hupa)
Director of Special Projects, National Native American AIDS Prevention Center

Warren Jimenez (Chumash Nation, Coastal Band)
Executive Director, National Native American AIDS Prevention Center

Parents Speak Up
Marcus Guinn (Osage/Ponca)
Campaign Leader, Native American Outreach Center/Parents Speak Up National Campaign

Mc. Hood Room
Addressing the Roots of and Preventing Suicides
This presentation will include a broad discussion about the issues underlying suicide in Tribal communities. Suicide as a consequence of childhood trauma as well as honoring cultural ways to build healthy families to counter such influences. An evaluation of a youth-targeted suicide prevention program, substance abuse, crisis intervention, suicide intervention and the development of coping skills and promising practices will be evaluated in a team-teaching style. The use of crisis lines as a resource for Native American communities will also be discussed. This will include the support process from first contact to follow-up with callers.

Crisis Lines: Native American Pilot Initiatives Through the National Suicide Prevention Lifeline
Leslie Storm, MA, LPC
Director, Crisis Line Program, Oregon Partnership
Member, National Suicide Prevention Lifeline
Suicide Prevention: As the Consequence of Childhood Trauma and the Interventions that Honor Cultural ways and Build Healthy Families in Tribal Communities

Marilyn Zimmerman, MSW (Assiniboine and Sioux Tribes)
Co-Director, Montana Center for Childhood Trauma
University of Montana

Strategies for Suicide Prevention

Jacqueline Geddes, Ph.D. (Sicangu Lakota)
Project Director, No More Fallen Feathers
Native American Rehabilitation Association of the Northwest

Oregon Room

Healing After a Suicide
Mr. Bighorn, past chairman of the Fort Peck Tribes, is the father of a child who completed a suicide. This discussion will provide a Tribal leader’s and father’s perspective on surviving the suicide of a child and outlining traits of a child in distress and depression.

Spike Bighorn, MBA
Former Chairman, Assiniboine and Sioux Tribes
Former Superintendent, Fort Peck Agency
Billings Education Line Officer, Bureau of Indian Education

Alaska Room

Indian Health Service Alcohol Intervention
This workshop will provide an update on the major Alcohol Intervention initiative underway to address alcohol abuse and injury prevention programs of the Indian Health Service.

David Boyd, MD, FACS (Honorary Blackfeet)
National Trauma Systems Coordinator, I.H.S. Headquarters

Mt. St. Helens Room

Lingering Effects of Methamphetamine Labs in Homes
Management of homes that were once used as methamphetamine labs is a growing problem in Indian Country. This workshop will examine how these homes can still have a negative effect on the future homeowners long after the chemicals are gone. It will focus on the chemicals used, the health effects associated, case studies, and how tribes can protect themselves.

Del Beaver, BS, MS (Muscogee Creek Nation)
Environmental Specialist, Muscogee (Creek) Nation of Oklahoma

Using Housing Regulations to Protect Native Communities from Methamphetamine Use and Production
Providing affordable homes for Indian families is the primary function for Indian Housing Authorities, Tribally Designated Housing Entities, and Tribes. Housing units must be maintained in a safe, healthy, and sanitary condition under the Native American Housing Assistance and Self-Determination Act (NAHASDA) regulations. A review of these regulations will provide tools that can be used to help combat methamphetamine use and production, and protect workers and residents within tribal communities.

Jay T. Barton
Technical Assistance and Training Specialist, National American Indian Housing Council
Oklahoma City, Oklahoma
12:15 – 1:30 PM
Luncheon Address: Lunch Provided
Lloyd Center Ballroom
Eric Broderick, D.D.S., M.P.H
Rear Admiral, United States Public Health Service
Deputy Administrator, Substance Abuse and Mental Health Services Administration
United States Department of Health and Human Services

Presentation of NIHB Local Impact Awards
Buford Rolin
Chairman, Poarch Band of Creek Indians
Vice-Chairman, NIHB Board of Directors
Gift Drawings

**AFTERNOON WORKSHOPS**

1:30 – 4:30 PM
Two Afternoon Workshop Sessions
These Sessions Repeat

**SESSION 1**
1:30 – 2:45 PM
Workshops Session I

**Hawthorne Room**

**Drug-Free Communities Grant Program**
A review of the nuts and bolts of the Drug Free Support Program and description of how the concept of "coalitions" relates to Native American communities and culture.

Ivette Ruiz
Program Officer, Drug Free Support Program
Center for Substance Abuse Prevention, U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

**Sellwood Room**

**Joint Addiction Technology Transfer Centers/Area Indian Health Board Supplements**
This workshop will describe a new funding opportunity to provide training and technical assistance for Tribes and tribal organizations. SAMHSA will support collaborative efforts between Substance Abuse and Mental Health Services Administration (SAMHSA)/Center for Substance Abuse Treatment (CSAT) Addiction Technology Transfer Centers and Area Indian Health Boards to provide technical assistance on substance use, disorders treatment and closely related issues. Information about this program will be shared, and participants will be invited to help shape the initiative by providing information on technical assistance needs in their organizations, communities, and Tribes.

Catherine D. Nugent, LCPC
Acting Team Leader for Workforce Development
Center for Substance Abuse Treatment
U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

**Three Sisters Room**

**Strategic Prevention Framework: Achieving Outcomes Using Interconnected Planning Models**
This workshop will describe the five-step planning model and the importance of implementing the five steps in a continuum to achieve outcomes.

Jon Dunbar-Cooper
Public Health Advisor, Center for Substance Abuse Prevention
Division of State and Community Assistance
U.S. Department of Health and Human Services SAMHSA
**Mt. Bachelor Room**

**Best practices in the Treatment and Prevention of Co-occurring Disorders Among American Indians**

The workshop provides a review of key aspects of engagement, treatment and prevention of American Indians with substance dependency and associated mental health disorders. A review of successful programs that have serviced an array of American Indian populations is presented along with models of care and treatment outcomes. Additionally, the workshop presents both clinical and infrastructure issues that are important for producing services and systems that are capable of addressing the whole needs of the individual. Workforce development, including key issues for Native communities in developing a workforce, and defining the workforce in a culturally acceptable context is discussed.

Charlene E. Le Fauve, Ph.D., Licensed Clinical AMHS Psychologist  
Chief Co-Occurring and Homeless Activities Branch  
Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services  

Anthony J. Ernst, Ph.D.  
Director, Technology Transfer for the Co-Occurring Center for Excellence  
The CDM Group, Inc.

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**Mt. Hood Room**

**Methamphetamine Treatment/Matrix Model**

The workshop will provide an overview of the Matrix Intensive Outpatient Treatment for People With Stimulant Use Disorders, provide and update on SAMHSA’s Methamphetamine Use in Indian Country Activities, and highlight Native American Rehabilitation Association of the Northwest (NARA).

Moderator: Love Foster Horton  
Public Health Advisor, Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services  

Kerri Smith Slingerland, MSW, BA *(Sault Sainte Marie Tribe of Chippewa)*  
Project Director, Family Circle Project  

Joan Bacchus  
Project Director, Raising Our Seventh Generation Project

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**Oregon Room**

**Tips for Successful Grant Writing**

This workshop introduces attendees to grant writing tips on how to write successful Federal grants. This session will explore the various Federal funding grants and how to leverage them to meet the comprehensive needs of a Tribal community.

Beverly Watts-Davis  
Senior Policy Advisor for Substance Abuse, Prevention and Treatment  
Office of the Administrator  
U.S. Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration

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**Alaska Room**

**The Public Health Approach to the Prevention of Suicide and Youth Violence**

The presentation will focus on the public health approach to the prevention of youth violence and the promotion of mental health. The Safe Schools/Healthy Students Initiative, a federal program designed to help communities address issues of mental health and youth violence, will be highlighted as an example of this approach.

David de Voursney  
Presidential Management Fellow  
Safe Schools/Healthy Students  
Substance Abuse and Mental Health Services Administration
Mt. St. Helens Room

SAMHSA's Children's Mental Health Initiatives
The presentation will describe the SAMHSA Children's Mental Health Initiative (Systems of Care Program) and the American Indian/Alaska Native communities that have benefited from these 6 year cooperative agreements since 1992. The presentation will also describe the Circles of Care program which is a 3 year Infrastructure Grant for developing and planning a model system of care for children's mental health in AI/AN communities. The program has been funded since 1998 and is currently in the third cohort of grantees. The basic principles and concepts of a system of care as it relates to AI/AN communities will be discussed. Potential opportunities for new funding under these two programs will be discussed.

Jill Erickson, MSW, LCSW (Santee Sioux Tribe of Nebraska)

Idaho Room

Addressing Tobacco Use: Primary Care and Traditionally-Informed Community Settings
This presentation will describe the functions and goals of the Indian Health Service Tobacco Control Task Force and their Tobacco Initiative Strategic Plan. This interactive workshop will explore the matrix of traditional use of Pistax'kaan (tobacco), manufactured tobacco product addiction, advocacy in tribal environments, and cultural solutions to reclaiming tobacco responsibility from the tobacco industry will be presented.

The Indian Health Service Tobacco Control Task Force
Lieutenant Commander Megan Wohr, RPH
Tobacco Control Specialist, Indian Health Service

Traditional Perspectives on Tobacco Use
Lori New Breast (Blackfeet)
Member Native American Tobacco Coalition of Montana

2:45 - 3:00 PM
Break - Hearty and Healthy Snacks Served in Lloyd Lobby

SESSION II
3:00 - 4:30 PM
Workshops II
These Workshops are a Repeat of Workshop Session I

Hawthorne Room

Drug-Free Communities Grant Program
A review of the nuts and bolts of the Drug Free Support Program and description of how the concept of “coalitions” relates to Native American communities and culture.

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Center for Substance Abuse Prevention, U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

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Public Health Advisor, Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

Kerri Smith Slingerland, MSW, BA (Sault Ste. Marie Tribe of Chippewa Indians)
Project Director, Family Circle Project

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Senior Policy Advisor for Substance Abuse, Prevention and Treatment
Office of the Administrator, U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Alaska Room

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David de Voursney
Presidential Management Fellow
Safe Schools/Healthy Students
Substance Abuse and Mental Health Services Administration

Mt. St. Helens Room

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Jill Erickson, MSW, LCSW (Santee Sioux Tribe of Nebraska)

4:30 – 5:15 PM
Tribal Recommendations to SAMHSA
Presented by: NIHB Board Members
Lloyd Center Ballroom

5:15 – 5:30 PM
Presentation of Regional Impact Awards
Buford Rolin
Vice-Chairman, NIHB Board of Directors
Gift Drawings

6:00 – 8:00 PM
Special Event for NIHB Annual Consumer Conference Registrants:
Private Reception and Private Shopping
Pendleton Woolen Mills Home Store
Meet in the Front of the Hotel – Transportation Provided

10% of the proceeds from all sales from the evening event go to support the mission of NIHB! The Board and Staff of NIHB thank you for supporting the national American Indian and Alaska Native voice for health!

Meet the Artist: Lillian Pitts (Indigenous People of the Columbia River Gorge)
She is the artist whose work is the basis for the NIHB 24th Annual Consumer Conference graphics. The artwork is based on the Pendleton blanket M's, Pitts designed.
WEDNESDAY, SEPTEMBER 26, 2007

FOCUS ON HOPE: HEALTH PROMOTION/DISEASE PREVENTION

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| 7:00 – 8:30 AM | Continental Breakfast Provided By Confederated Tribes of Siletz Indians  
Lloyd Center Ballroom |
| 7:00 – 5:00 PM | Registration and Information Desk Open  
Conference Lobby |
| 7:00 – 5:00 PM | Reflection Space Open  
Ross Island Room |
| 8:00 – 3:00 PM | Exhibits Open |
| 8:00 AM       | Welcome and Overview of Day  
Lloyd Center Ballroom  
H. Sally Smith  
Chairman, NIHB Board of Directors |
| 8:05 – 8:35 AM | Daily Keynote Address: Is Hope Possible?  
Robert G. McSwain  
Deputy Director, Indian Health Service |
| 8:35 – 9:00 AM | Finding the Humor in Healing  
Carole Anne Heart (Sioux Nation)  
Executive Director, Aberdeen Area Chairman's Indian Health Board |
| 9:00 – 9:45 AM | NIKE Air Native N7 Experience  
Nike Air Native N7  
Sam McCracken (Assiniboine and Sioux Tribes)  
Manager, Native American Business  
Nike, Inc.  
Athletics Beyond Good Sportsmanship: Integrity and Strength for Native Kids  
Notah Begay III (Navajo/San Felipe Pueblo/Isla Pueblo)  
Nike Athlete 4-Time Winner of the Professional Golfers' Association of America Tour |
| 9:45 – 10:45 AM | NIKE Air Native N7 Experience Fun Fitness Event  
Meet Outside the Lloyd Center Ballroom  
T-Shirts and Special Prizes Provided to Participants of the Walk by NIKE |
| 10:00 – 12:00 Noon | Nike Air Native Tech Center Open  
Exhibit Hall |
| Noon – 1:30 PM | Luncheon Session Reconvenes Lunch  
Provided by Virchow, Krause & Company, LLP |
| Noon – 12:45 PM | Luncheon Presentation  
A First Decade of Success: Special Diabetes Program for Indians  
Lloyd Center Ballroom  
Moderator: Buford Rolin  
Vice-Chairman, NIHB Board of Directors  
Panelists:  
Kelly Acton, M.D., M.P.H. (Shoshone/Hoopa Descendant)  
Director, Diabetes Prevention and Control Division, Indian Health Service, United States Department of Health and Human Services  
Chris Collins (invited)  
Legislative Assistant, Office of Senator Pete Domenici (R-NM)  
Angie Montes (invited)  
American Diabetes Association  
Ronnie Tepp (invited)  
Juvenile Diabetes Research Foundation |
SECOND PANEL OF LUNCHEON SPEAKERS

12:45 – 1:30 PM  Race to the Finish Line: Victory and the IHCIA!

Moderators:
Rachel Joseph (Lone Pine Paiute Shoshone)
Co-Chair of the Tribal Steering Committee for the Reauthorization of the Indian Health Care Improvement Act
Buford Rolin (Possum Band of Creek Indians)
Co-Chair of the Tribal Steering Committee for the Reauthorization of the Indian Health Care Improvement Act

Panelists
Richard Litsey, Esq. (Muscogee Creek Nation) (invited)
Counsel and Senior Advisor for Indian Affairs
Majority Staff, Senate Finance Committee
Michael Mahsetky (Comanche)
Director, Congressional and Legislative Affairs, Indian Health Service
Stacy Bohlen (Sault Ste. Marie Chippewa)
NIHB Executive Director
Kitty Marx, JD
NIHB Legislative Director

AFTERNOON WORKSHOPS

1:30 – 3:00 PM  Two Afternoon Workshops

SESSION I

Hawthorne Room

Expanding Oral Health Services in American Indian Communities
The oral health disparities of American Indian people are profound when compared to the general U.S. population. IHS reports staggering rates of tooth decay and periodontal disease. To address the crises, Tribes are seeking to enhance service delivery, recruit and retain more dentists and expand auxiliary services. Tribal and IHS locations are making efforts to utilize existing resources to institute best practices in order to provide preventive, primary and specialized dental care in remote, rural and medically disadvantaged locations in Indian Country.

Carol Odinoff, RN, MHCA
Assistant Director of the Community Health Aide Program/Rural Health Alaska Native Tribal Health Consortium

Todd Harsfield, DDS
Clinical Faculty, AT Still University
Arizona School of Health Sciences

Alyssa York, DDS
Dental Director, Inter-Tribal Council of Arizona, Inc.

Joe Finkbonner, MHA
Executive Director, Northwest Portland Area Indian Health Board

Moderator: Valerie Davidson, Esq. (Yup’ik Eskimo)
Senior Director, Legal & Intergovernmental Affairs
Alaska Native Tribal Health Consortium
Chair, CMS Tribal Technical Advisory Group
Sellwood Room

Diabetes Education in Tribal Schools Curriculum and Native American Child Health Advocacy
This presentation will invite participants to consider the full range of Native American child health issues and advocacy strategies. Special attention will be paid to the Diabetes Education in Tribal Schools Curriculum and the Eagle Books as an excellent example of two projects collaborating in a national effort to decrease the incidence and improve the care of Type II diabetes among AI/AN.

Update on Activities: Committee on Native American Child Health
Kelly Moore, MD, FAAP (Muscogee Nation)
Chair, Committee on Native American Child Health
American Academy of Pediatrics

The Diabetes Education in Tribal Schools Curriculum and Eagle Books
Lemyra DeBruyn, Ph.D.
Senior Scientist, Native Diabetes Wellness Program
Centers for Disease Control
Carolee Dodge-Francis, Ed.D. (Sovereign Oneida Nation of Wisconsin)
Executive Director, American Indian Research and Education Center
University of Nevada, Las Vegas School of Public Health

Sisters Room

Native Youth School Health
This presentation will include strategies to improve school health services to Native American Youth. Participants will be informed of major health disparities and will develop an understanding of the need for health services access in schools.

Diana Goolsby, RN, PHN
Western Oregon Service Unit School
Health Services Improvement Group
Indian Health Service

Jack Edmo, Jr.
Member, School Health Services Improvement Group
Bureau of Indian Education

Mt. Bachelor Room

Reducing Barriers to Cancer Screening and Care
This presentation will showcase two projects designed to reduce barriers to cancer screening and care for AI/AN people. The “Voices” project explores the challenges that keep AI/AN women from being screened for breast and cervical cancer, recommended diagnostic follow-up, and other health care screenings.

The Voices Project
Sharon Fleming, AAS, BGS (Choctaw/Cherokee)
Consultant, Native American Rehabilitation Association of the Northwest, Inc.

Jen Olson, MS, MA
Epidemiologist, Native American Rehabilitation Association of the Northwest, Inc.

Mt. Hood Room

Sexual Assault and Rape: A National, Native Strategy to Address Treatment Protocols
With growing national attention on the issues of Sexual Assault/Rape of Indian women, there is a need for a national, Native strategy to address proper physical and mental health treatments for our women, including a long term therapeutic care model. Find out what the Native Women’s Society of the Great Plains and its partners are doing to advance this agenda.
Cecelia FireThunder (Oglala Lakota)
Coordinator, Native Women's Society of the Great Plains
Past President of the Oglala Sioux Tribe

Oregon Room

Sexuality, Stigma and Other Issues Relating to HIV
This is an interactive workshop where participants will explore the connection between social and/or health related issues and how they are related to the HIV epidemic among AI/AN people. Participants will especially explore social values and myths concerning human sexuality and homophobia and their impact on HIV prevention as well as treatment. Participants will also become more familiar with the IHS plan for HIV.

Tommy Chesbro, MHR, AASECT (Cherokee and Lumbee)
Vice President of Education, Planned Parenthood of Arkansas and Eastern OK

Alaska Room

Building the Public Health Workforce
This workshop will address two programs designed to increase the human resources capacity for public health in Indian Country.

Joint Institute on Indigenous Health Research

Jocelynn Cook, Ph.D., MBA
Manager, Research Coordination Unit Health Canada

Leo Nolan III, M.Ed. (Akwesasne Mohawk)
Senior Policy Analyst, Office of the Director
Indian Health Service

Native American High School Summer Program at Harvard Medical School

Brian King
Program Director, Native American High School Summer Program
Harvard University

Kenneth Smoker, Jr. (Assiniboine and Sioux of Fort Peck)
Health Programs Specialist, Fort Peck Tribes/Indian Health Service

Mt. St. Helens Room

Substance Abuse Prevention on the Tribal Level
This session will guide participants through two distinct approaches that have garnered the Cherokee Nation a national reputation for effective substance abuse prevention. First, the audience will be educated through an interactive PowerPoint presentation covering the growth and expansion of its Behavioral Health Prevention Programs including its nationally known methamphetamine prevention efforts. Second, Guinness World Record Holder Brian Jackson, aka “The I Believe Guy” will take the audience on one man’s journey from a life of addiction to success.

Levi Keecher (Cherokee)
Prevention Programs Manager, Methamphetamine Prevention Coordinator
Cherokee Nation Behavioral Health

Brian Jackson (Cherokee, Creek and Seminole)
Native American Motivational Speaker

3:00 – 3:15 PM
Break: Healthy and Hearty Snacks Sponsored By: Parents Speak Up!
SESSION II
3:15 – 4:45 PM  Workshops Session II

Hawthorne Room

Accessing Federal Resources for Medical, Dental and Behavioral Health Needs
This presentation will review two approaches to increase funding for health systems at the Tribal and regional level.

Accessing Health Resources Services Administration’s (HRSA) Community Health Center (CHC) Programs

Manual Morgan
Morgan and Associates

Nettie Prack, MNM, BSN, BS
Consultant, Back of Beyond Consulting

California American Indian Recovery (CAIR) Program

Michael Weahkee, MBA, MHSA (Zuni Pueblo)
Department Director, Family and Community Health Services
California Rural Indian Health Board

Vicki Sanderford-O’Connor, MA
Manager, Social Wellness Program
California Rural Indian Health Board

Sellwood Room

Cultural Awareness, Empowerment and Hip Hop for Reaching Today’s Youth
This workshop will review the concepts used by the presenter as he travels across Indian Country reaching out to Native American youth to promote a message of empowerment, cultural pride, and healthy lifestyles. The presentation will describe the use of traditional and contemporary expressions of art, culture, education and multi-media techniques to engage youth and invest them with pride and hope.

Marcus (Quese Imc) Little Eagle (Pawnee and Seminole)
Spokesman, NVision, A Native Youth Development Organization

Three Sisters Room

Hopi Project to Address Dental Effects of Methamphetamine Use
This presentation will provide background and education to participants on the harmful effects and oral implications of “Meth Mouth.” Additionally, participants will have a greater awareness of specific issues with teeth/mouth due to the ingredients and method of the use of methamphetamine.

Maxine Brings Him Back-Janis, MPH, RDH (Oglala Lakota)
Director, Hopi Project

Moderator: Valerie Davidson, Esq. (Tup’ik Eskimo)
Senior Director, Legal & Intergovernmental Affairs
Alaska Native Tribal Health Consortium

Mt. Bachelor Room

Diabetes On a National Level: Reauthorization of the SDPI and Evaluation of a National Youth Campaign
This workshop combines information on advocacy for the reauthorization of the Special Diabetes Program for Indians Program with the evaluation of the National Diabetes Education Program American Indian Youth Campaign.

Advocacy for Reauthorization of the Special Diabetes Program for Indians

Yvette Roubideaux, MD, MPH (Rosebud Sioux/Standing Rock Sioux)
Assistant Professor, University of Arizona
Youth-Driven "Move It" Campaign
Gale Marshall (Oklahoma Choctaw)
Vice Chair, American Indian/Alaska Native Work Group
National Diabetes Education Program
John Riley (Miami Tribe of Oklahoma)
Student “Move It” Program

Mt. Hood Room
Preventing and Managing Diabetes and Its Complications, Including Cardiovascular Disease
This presentation includes discussion of a new guide entitled, “Sidestep.” To better reach those at risk of diabetes and its complications, the Amputee Coalition of America has collaborated with numerous organizations and professions to create a new, easy-to-read publication for consumers that can be accessed at no charge. Additionally, participants will be exposed to the specific activities and experiences of the Yakama Healthy Heart Program. Yakama Healthy Heart Program networks, collaborates and implements interventions and activities with the Yakama Nutrition Program, Yakama Tribal Diabetes Program, Yakama Wildlife Program, Yakamart, Yakama Land Enterprise, and other resources to provide services to all registered participants of the Healthy Heart Program.

Yakama Healthy Heart Program
Robin John, RPH
Pharmacist, Lead Case Manager
Yakama Healthy Heart Program
Rex Quaempts, MD (Yakima)
Director, Yakama Healthy Heart Program
Sharon John, RN (Umatilla Tribe)
Program Coordinator, Yakama Healthy Heart Program

SideStep
Charlene Whelan, LCSW, MBA
Health Educator, Amputee Coalition of America

Oregon Room
Funding and Developing HIV/AIDS Programming
By the end of the workshop, participants will leave with materials, information and strategies to support their HIV/AIDS programs. Different projects and interventions will be shared to provide an example of how a community programs might be funded within existing agencies of HHS. Specific funding streams will be examined and standard grant language will be discussed. Participants will also become aware of other resource development strategies available to them in addition to grant seeking.

Evonne Bennett, BA
HIV/AIDS Capacity Building Division at the Office of Minority Health Resource Center

Alaska Room
Accessing Promised Benefits: World Trade Center Recovery Workers and Veterans
This presentation will review the benefits available to recovery workers and veterans including advocacy methods for gaining access to such benefits.

Assessing and Meeting the Needs of Mohawk Ironworkers Following the World Trade Center Attacks
Stephanie St. Pierre, MD, MPH
President, St. Pierre Group
Kathy Kirkland, MPH
Executive Director, Association of Occupational and Environmental Clinics
Programs Available to Veterans and their Families

WJ "Buck" Richardson, Jr., CHEM
Minority Veterans Coordinator, VA Rocky Mountain Healthcare Network VISN 19

Mt. St. Helens Room

Building the American Indian Physician Workforce
This workshop will review techniques from multiple programs designed to increase the number of American Indian and Alaska Native physicians. The Indians Into Medicine Program (INMED) is an academic support program assisting American Indian Students in the quest to serve the health care needs of our native communities.

Lucinda Meyers, MSW (Mskoke)
National Native American Youth Initiative
Program Director, Association of American Indian Physicians

Gene Delorme, Esq. (Turtle Mountain Band of Chippewa)
Director, Indians Into Medicine Program

NIHB@35 ANNIVERSARY GALA
NWPAIHB CULTURE NIGHT
(Regalia Welcome)

6:00 – 9:00 PM
Mini Pow Wow
Lloyd Center Ballroom
NIHB@35 Gala and Northwest Portland Area Indian Health Board Culture Night

This special event is cosponsored by the Northwest Portland Area Indian Health Board and the National Indian Health Board

Master of Ceremonies
Billy Frank, Jr. (Nisqually)
Chairman, Northwest Indian Fisheries Commission

Your Hosts offer many thanks to the Northwest Tribes who generously donated food for this celebration:

Salmon: Northwest Indian Fisheries Commission
Squamish Island Tribe
Columbia River Inter Tribal Fish Commission

Huckleberries: Confederated Tribes of Warm Springs
Confederated Tribes of Colville
Yakama Nation

Highlights of The Evening’s Events

• NIHB@35: A Journey to Empower Native People for Health

• Special Gift Presentation to NIHB from the law firm of Hobbs, Straus, Dean and Walker, LLP (A commissioned work by Artist David Boxley, Tsimshian carver from Metlakatla, Alaska. Mr. Boxley will offer a blessing ceremony for the gift)

• NPAIHP 35 Years of Service: Our Vision, Our Mission and Our Tribes

• Drums: Native American Rehabilitation Association of the Northwest and the NPAIHB

• Dancers from Tribes around the Portland Area

• NIHB 2007 Jake White Crow Award will be Presented by Mickey Peercy, 2006 Winner

• Special Honoring by the Albuquerque Area Indian Health Board

• Gift Drawings
## THURSDAY, SEPTEMBER 27, 2007

### CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS) DAY

<table>
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<th>Time</th>
<th>Event</th>
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| 6:30 – 7:00 AM | **Morning Fun Fitness Walk**  
Meet at Conference Lobby |
| 7:00 AM – 5:00 PM | **Registration and Information Desk Open**  
Continental Breakfast Provided By: Navajo Division of Health  
Reflection Space Open Ross Island  
Exhibits Open  |
| 8:00 AM – 5:00 PM | **Welcome to Centers for Medicare and Medicaid Services (CMS) Day and Greetings**  
Lloyd Center Ballroom  
**Welcome**  
Pearl Capoeman-Baller *(Quinault Tribe)*  
Portland Area Representative to the CMS Tribal Technical Advisory Group (TTAG)  
**Introductions of Regional Administrators**  
Dorothy Dupree, MBA *(Assiniboine and Sioux Tribes)*  
Director, Tribal Affairs Group  
Office of External Affairs, CMS  
**Greetings**  
Jackie Garner  
Medicaid Consortium Administrator, CMS  
John T. Hammarlund  
Regional Administrator, Seattle and Chicago Regional Offices, CMS  
**Introduction of CMS Keynote Speaker**  
Mickey Peercy  
Executive Director of Health, Choctaw Nation of Oklahoma  
NIHB Representative to the CMS TTAG  |
| 8:30 - 9:00 AM | **Keynote**  
CMS Administrator Designee  |
| 9:00 – 9:30 AM | **CMS Tribal Technical Advisory Group Perspective**  
Valerie Davidson, Esq. *(Yup'ik Eskimo)*  
Senior Director, Legal & Intergovernmental Affairs  
Alaska Native Tribal Health Consortium  
Chair, CMS TTAG  |
| 9:30 – 10:00 AM | **Question & Answer Period**  
World Premiere of NIHB/CMS Collaborative Video  
Encouraging American Indians and Alaska Natives to Enroll in Medicare and Medicaid  
“*My Health, My Community, Our Future ...*”  
Stacy Bohlen *(Sault Ste. Marie Chippewa Tribe)*  
Executive Director, National Indian Health Board  
Gale Marshall *(Choctaw)*  
Two Feathers Media  |
| 10:30 – 11:30 AM | **Plenary Session**  
This Session will Showcase Best Practices for Outreach and Education to Improve  
American Indian and Alaska Native Access to Medicare & Medicaid Programs  
Moderator:  
Dorothy Dupree, CMS, and Mickey Peercy, NIHB  
This plenary session will provide conference participants with a brief overview of the Medicare, Medicaid and State Children's Health Insurance Program (SCHIP) followed by presentations "highlighting" best practices implemented in tribal communities that have improved access to benefits and increased reimbursements. The afternoon workshop sessions will include workshops on "best practices" with more detailed presentations of the issues from this plenary session. |
Payment of Part D Premiums
Phil Norrgard
Director of Human Services
Fond du Lac Band of Lake Superior Chippewa

Increased Outreach and Enrollment Resulting in Increased Reimbursement
Edwin L. McLemore (Cherokee Nation)
Chief Executive Officer (CEO)
Hastings Indian Hospital, Tahlequah, OK

Improved Working Relationships between Tribes and State Medicaid Programs
Bill Lance (Chickasaw Nation)
Hospital Administrator
Carl Albert Indian Hospital, Ada, Oklahoma

11:30 – 12:00 Noon Overview and History of Medicare & Medicaid Provisions of the Indian Health Care Improvement Act
Kitty Marx, JD
Legislative Director, NIHB

12:00 - 1:30 PM Lunch (on own)

AFTERNOON WORKSHOPS

1:30 – 4:45 PM Workshops are in Two Sessions
SESSION I
1:30 - 3:00 PM

Hawthorne Room

Getting Started with Medicare-like Rates
This workshop will provide an overview of the “Medicare-like rates” regulations, that became effective July 5, 2007. These regulations will require Medicare participating hospitals to accept Medicare like rates for contract health services. What do the regulations say? This workshop will include an overview of the regulations and presenters will demonstrate the Centers for Medicare & Medicaid (CMS) Pricer Software available to Tribes to calculate the Medicare-like rate payments. This workshop will also enable participants to meet one on one with CMS and IHS staff to ask specific questions and obtain additional resources.

Brenda Jeanotte-Smith (Turtle Mountain Chippewa)
Director, Contract Health Services Program
Indian Health Services

Cindy Mowry Murphy
Technical Advisor, Division of Institutional Claims Processing
Centers for Medicare and Medicaid Services

Joseph Bryson
Provider Billing Group, Centers for Medicare and Medicaid Services

Moderator: Jim Roberts (Hopi/ Sioux)
Policy Analyst, Northwest Portland Area Indian Health Board
Portland Area Alternative to the CMS TTAG

Sellwood Room

My Medicare, My Community: What a Medicare Beneficiary Should Know
This workshop will provide a general overview of the Medicare program focusing on information important for Medicare and future Medicare beneficiaries. This workshop will explain eligibility and enrollment requirements for Part A, Part B, and Part D. It will also explore options for Medicare beneficiaries under the Medicare Part C program.

Carlyle W. Begay, MHSM (Navajo Nation)
VP & Chief Development Officer
American Indian Health Management & Policy (AIHMP Inc.)
Rodger N. Goodacre  
Health Insurance Specialist, Tribal Affairs Group  
Centers for Medicare and Medicaid Services

Moderator: Jim Lamb (Cherokee Nation)  
Director, Patient Financial Services  
Alaska Native Medical Health Consortium  
Alaska Area Alternate to the CMS TTAG

**Three Sisters Room**

**Options Available for Long Term Care and Elder Care in Indian Country**

With a rising need for Long Term Care among American Indians and Alaska Natives, Tribes are exploring options for providing culturally appropriate services to elders in their tribal communities, close to family and friends. This workshop will explore long term care program options within Medicare and Medicaid, one Tribe’s experience in applying for the CMS PACE program, and how other Tribes are developing programs to meet the needs of the elders in their communities.

Anita Yuskauskas, Ph.D.  
Technical Director, Home & Community Based Services  
Centers for Medicare and Medicaid Services

Melanie Knight (Cherokee Nation)  
Secretary of State, Cherokee Nation

Kay Branch  
Elder/Rural Health Program Coordinator  
Alaska Native Tribal Health Consortium

Moderator: Robert Moore  
Rosebud Sioux Tribal Council Member  
Aberdeen Area Representative to the CMS TTAG

**Mt. Bachelor Room**

**Best Practices for Ensuring Maximum Reimbursement of Prescription Drugs**

Pharmacy reimbursements are sometimes difficult to collect because of the complex enrollment process, payment of premiums for participation, and different reimbursement methodologies. This workshop will provide information on how one Tribe, through the payment of Part D premiums for its members, increased pharmacy reimbursements and saved contract health service funding. This workshop will also discuss one Tribe’s experience in maximizing pharmacy collections through best practices of the Muscogee (Creek) Nation Health System. The workshop will also include a demonstration of the CMS Part D Plan Finder on-line tool.

Phil Norrgard, MSW  
Director, Human Services  
Fond du Lac Band of Lake Superior Chippewa

Philip Talamasy (Muscogee Creek)  
Third Party Billing Supervisor, Muscogee Creek Nation

Nancy Rios  
Native American Contact, Region VII  
Centers for Medicare and Medicaid Services

Moderator: Kris Locke  
Health Policy Analyst, Locke and Associates  
Tribal Technical Advisor for the CMS TTAG
Mt. Hood Room

Navigating as a Medicaid Provider
How the Medicaid Program can Benefit Your Community. Medicaid is the second largest payer of Indian health care after the Indian Health Services. Learn the basics of how your Indian health program, as a provider of services, can obtain reimbursements from your local Medicaid program. Although covered services vary from state to state, this workshop will present information on how a health care provider can best navigate through a State Medicaid program and obtain maximum Medicaid reimbursements. Learn how you can make the most of the Medicaid program in your State.

Donald Warne, MD, MPH (Oglala Lakota)
President and Chief Executive Officer
American Indian Health Management & Policy (AIHMP), Inc.

Jack Allen
Health Insurance Specialist, Medicare Fee for Service Branch
Division of Medicaid and Children’s Health
Centers for Medicare & Medicaid Services, Dallas Regional Office

Carol Barbero, Esq.
Hobbs, Straus, Dean & Walker, LLC
Tribal Technical Advisor to the CMS TTAG

Moderator: Brenda Shore (Seminole Tribe of Florida/Cheyenne River Sioux Tribe)
Director, Tribal Health Program Support
United South and Eastern Tribes, Inc.

Oregon Room

Access & Reimbursement: Medicaid Services for Mental Health, Substance Abuse, and Youth with Disabilities
This workshop will present information on provisions in the Medicaid program that allow for reimbursement for mental health services, substance abuse services, and services for youth with disabilities. Learn about what services are available, how providers can be reimbursed for those services, and barriers to accessing benefits and reimbursements.

Cynthia Gillaspie
Native American Contact, Region VIII
Centers for Medicare and Medicaid Services

Myrna Pavatea (Hopi)
Director, Behavioral Health Services
Salt River Tribe, Arizona

Jason Dollarhide
2nd Chief Peoria Tribe of Oklahoma

Moderator: Cinda Hughes (Kiowa Tribe of Oklahoma)
Legislative Associate, National Congress of American Indians
NCAI Representative to the CMS TTAG

Alaska Room

Activities of the CMS Tribal Technical Advisory Group
This workshop will present an overview of the CMS TTAG and serve as an opportunity to highlight and describe TTAG subcommittee activities:

- Find out about the activities of the Data Subcommittee researching the number of AI/ANs enrolled in Medicare and Medicaid.

- Accessing Medicaid services for out of state residents, such as Indian children in Boarding Schools can be difficult. The Across State Borders subcommittee is pursuing administrative and legislative remedies to address this issue.

- In July, 2007, the CMS published final regulations on documentation for proof of U.S. Citizenship for Medicaid, and in most instances, Tribal enrollment cards are not legitimate documentation. Find out about the CMS TTAG activities on this issue.
Jim Crouch (*Cherokee Nation*)
Executive Director, California Rural Indian Health Board

*Anselm Roanhorse* (*Navajo Nation*)
Executive Director, Navajo Nation Division of Health

Moderator: *Valerie Davidson, Esq.* (*Tun'ik Eskimo*)  
Senior Director, Legal & Intergovernmental Affairs  
Alaska Native Tribal Health Consortium  
Chair, CMS Tribal Technical Advisory Group

**Mt. St. Helens Room**

**Best Practices In Developing State and Tribal Relations**
Developing State: Tribal Relations: This workshop will present information on how Tribes and State Medicaid programs can work together in a collaborative effort to improve AI/AN access to Medicaid and SCHIP services.

*Bill Lance* (*Chickasaw Nation*)  
Hospital Administrator, Carl Albert Indian Hospital  
Ada, Oklahoma

*Marnie Hodahkw'en* (*Prairie Band of Potawatomi*)  
Policy Advisor for Tribal Affairs  
Office of the Governor, State of Arizona

*Colleen F. Cawston* (*Colville Tribe*)  
Department of Social & Health Services  
Indian Policy and Support Services  
Olympia, Washington

Moderator: *Mickey Peercy*  
Executive Director of Health Services, Choctaw Nation of Oklahoma  
NIHB Representative to the CMS TTAG

**3:00 – 3:15 PM**  
**BREAK: Healthy and Hearty Snacks**  
Sponsored by: Suquamish Clearwater Resort and Casino

**SESSION II**

**3:15 – 4:45 PM**  
**Afternoon Workshops Session II**

**Hawthorne Room**

**Getting to Know the Indian Health Service (IHS) Contract Health Service (CHS) Fiscal Intermediary (FI)**
Now that the Medicare-like rates are effective, Tribes are exploring the various options available for the calculation and payment of the rates. Buying back services from the IHS CHS FI is one possible option. The workshop will provide an overview of the services the IHS CHS FI provides, e.g. coordination of benefits, payment of claims, post payment review of claims, etc., and other information for Tribes to consider in deciding options for paying CHS claims under the new Medicare-like rates.

*Inge Zamora*  
Manager, IHS/CHS Provider Database, Fiscal Intermediary, New Mexico

Moderator: *Jim Roberts* (*Hopi/Seinoux*)  
Policy Analyst, Northwest Portland Area Indian Health Board  
Portland Area Alternate to the CMS TTAG
Sellwood Room

Understanding Medicaid: What a Medicaid Beneficiary Should Know
Learn the basics of the Medicaid program, the services covered by Medicaid, and how you, your family, or members of your community can qualify for Medicaid. Medicaid is the second largest payer of Indian health after IHS. Through this workshop, understand how the Medicaid program can benefit and directly impact you, your family and your community. Learn how you can make the most of the Medicaid program in your State.

Donald Warne, MD, MPH (Oglala Lakota)
President and Chief Executive Officer
American Indian Health Management & Policy (AIHMP), Inc.

Julie Rand
Native American Contact, Region II
Centers for Medicare and Medicaid Services

Carol Barbero, Esq.
Hobbs, Straus, Dean & Walker, LLC
Tribal Technical Advisor to the CMS TTAG

Moderator: Brenda Shore (Seminole Tribe of Florida/Cheyenne River Sioux Tribe)
Director, Tribal Health Program Support
United South and Eastern Tribes, Inc.

Three Sisters Room

Options Available for Long Term Care and Elder Care in Indian Country
With a rising need for Long Term Care among American Indians and Alaska Natives, Tribes are exploring options for providing culturally appropriate services to elders in their tribal communities, close to family and friends. This workshop will explore long term care program options within Medicare and Medicaid, one Tribe’s experience in applying for the CMS Program for All-inclusive Care for the Elderly (PACE) program, and how other Tribes are developing programs to meet the needs of the elders in their communities.

Anita Yuskauskas, Ph.D.
Technical Director, Home & Community Based Services Quality
Centers for Medicare and Medicaid Services

Melanie Knight (Cherokee Nation)
Secretary of State, Cherokee Nation

Kay Branch
Elder/Rural Health Program Coordinator
Alaska Native Tribal Health Consortium

Moderator: Robert Moore
Rosebud Sioux Tribal Council Member
Aberdeen Area Representative to the CMS TTAG

Mt. Bachelor Room

Best Practices for Ensuring Maximum Reimbursement of Prescription Drugs
Pharmacy reimbursements are sometimes difficult to collect because of the complex enrollment process, payment of premiums for participation, and different reimbursement methodologies. This workshop will provide information on how one Tribe, through the payment of Part D premiums for its members, increased pharmacy reimbursements and saved contract health service funding. This workshop will also discuss one Tribe’s experience in maximizing pharmacy collections through best practices of the Muscogee (Creek) Nation Health System. The workshop will also include a demonstration of the CMS Part D Plan Finder on-line tool.

Phil Norrgard, MSW
Director Human Services, Fond du Lac Band of Lake Superior Chippewa

Phillip Talamasy (Muscogee Creek)
Third Party Billing Supervisor, Muscogee Creek Nation
**Mt. Hood Room**

**Navigating as a Medicare Provider**
This workshop will be of interest to third party billing staff and others interested in learning how to participate as an effective Medicare provider. This workshop will focus on how you can help your community benefit from Medicare programs and services. Learn about provider types, billing, certification and other options to help you maximize reimbursements under the Medicare program.

Carlyle W. Begay, MHSMS (*Navajo Nation*)
VP & Chief Development Officer
American Indian Health Management & Policy (AIHMP Inc.)

Paula Hammond
Technical Advisor, Medicare Fee for Service Branch, Region VI
Centers for Medicare and Medicaid Services

Moderator: Jim Lamb (*Cherokee Nation*)
Director, Patient Financial Services
Alaska Native Medical Health Consortium
Alaska Area Alternate to the CMS TTAG

**Oregon Room**

**Navajo Nation Behavioral Health Transformation**
This presentation will focus on the Navajo Nation’s efforts in New Mexico to closely link the Tribe’s program with reform efforts of a statewide behavioral health system. The workshop will describe the consumer involvement and cultural responsiveness, development of specific treatment services and Medicaid and other funding.

Christopher Morris, Ph.D.
Clinical Director, Navajo Department of Behavioral Health Services

Albert Long, M.A. (*Navajo Nation*)
Senior Programs and Projects Specialist
Navajo Department of Behavioral Health Services

Carolyn Thomas Morris, Ph.D. (*Navajo Nation*)
Clinical Psychologist, Navajo Department of Behavioral Health Services

Moderator: Roz Begay (*Navajo Nation*)
Navajo Nation Division of Health
Navajo Area 2nd Alternate to the CMS TTAG

**Alaska Room**

**Best Practices of Tribes improving access and enrollment in Medicaid**
This workshop will present information on the experience of Tribal programs in accessing and enrolling tribal members in Medicaid. The workshop will include one Tribe’s participation in the Temporary Assistance for Needy Families (TANF) program and how they were able to use this status to increase enrollment of tribal members in Medicaid. The workshop will also include a presentation on the Medicaid Administrative Match (MAM) program and how it can be used to increase enrollment in Medicaid.

Violet Mitchell-Enos (*Yavapai-Marcopa*)
Executive Director, Department of Health and Human Services
Salt River Tribe, Arizona
Jim Crouch (Cherokee Nation)
Executive Director, California Rural Indian Health Board
California Area Representative to the CMS TTAG
Moderator: Valerie Davidson, Esq. (Yup'ik Eskimo)
Senior Director, Legal & Intergovernmental Affairs
Alaska Native Tribal Health Consortium
Chair, CMS Tribal Technical Advisory Group

Mt. St. Helens Room

Best Practices in Outreach and Enrollment of AI/AN in Medicaid Programs
This workshop will present information on the various programs Tribes have developed to improve access to and enrollment of AI/AN in Medicare, Medicaid, and SCHIP. This workshop will feature best practices on outreach programs providing counseling and advocacy to elders and people with disabilities improve access and how outreach and enrollment programs result in increased third party collections in tribal communities.

Jennifer Jones (Cherokee Nation)
Business Process Coordinator, W.W. Hastings Indian Hospital
Tahlequah, Oklahoma

Janell Hardy (Navajo Nation)
Public Benefits Specialist, Public Benefits Outreach Project, Inter-Tribal Council of Arizona Agency on Aging

Moderator: Mickey Peercy
Executive Director of Health Services, Choctaw Nation of Oklahoma
NIHB Representative to the CMS TTAG
FRIDAY, SEPTEMBER 28, 2007

PUBLIC HEALTH DAY

7:00 AM – 2:00 PM  Registration and Information Desk Open
7:00 AM – 5:00 PM  Reflection Space Open
8:00 AM – 12:00 Noon Exhibits Open
12:00 – 2:00 PM  Exhibit Break Down
7:00 – 8:30 AM  Continental Breakfast Sponsored By United South and Eastern Tribes, Inc.
8:00AM - 12:00 Noon Exhibits Open
12:00 – 2:00 PM  Exhibit Break Down
7:00 – 8:30 AM  Continental Breakfast Sponsored By United South and Eastern Tribes, Inc.

LLOYD CENTER BALLROOM

8:00 AM-1:00 PM  Plenary Session

8:00 – 8:10 AM  Welcome and Remarks

H. Sally Smith
Chairman, NIHB Board of Directors

8:10 - 8:40 AM  A View from the Front: Suicide Prevention in Indian Country

Vickie LaFromboise, MS  (Blackfeet)
Tribal Prevention Specialist, Education Development Center, Inc.
Suicide Prevention Resource Center (SPRC)

8:40 – 9:00 AM  Tribal Consultation, Public Health & You
This session will detail Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry Tribal Consultation Advisory Committee to advise CDC Budgetary Planning Processes for Indian Country.

Jefferson Keel
Lt. Gov. Chickasaw Nation
Chair, Tribal Consultation Advisory Committee

Linda Holt
Chairman, Northwest Portland Area Health Board
Co-Chair, Tribal Consultation and Advisory Committee

9:00 – 10:00 AM  Public Health Emergency!
Who’s in Charge and Does Sovereignty Matter?
Tribes are exploring ways to strengthen their codes and their public health infrastructure to protect their people. Find out why and how they are doing it.

Moderator: Valerie Davidson, Esq.  (Tupik Eskimo)
Senior Director, Legal & Intergovernmental Affairs
Alaska Native Tribal Health Consortium
Chair, CMS Tribal Technical Advisory Group

Readying for Emergencies: Public Health Legal Preparedness

Richard A. Goodman, MD, JD, MPH
Public Health Law Program
Centers for Disease Control and Prevention

Will My Community Be Prepared?

Teresa Wall, MPH
Founder Native American Public Health

Public Health is a First Responder

Vickie Blythe, BSN, RN  (Cherokee)
Operations Director, Cherokee Health and Medical Division
10:00 – 11:00 AM  Tribal Epicenters: What Are They and Why do They Matter?
This session will explore Tribal Epicenters’ innovative and important work to provide answers to the frequently heard statement in Indian Country “There’s no data!”

Moderator: Victoria Warren-Mears, Ph.D., RD
Director, Northwest Tribal Epicenter
Northwest Portland Area Indian Health Board

History of Development of IHS Tribal Epicenters
Nathaniel Cobb, MD
Chief, Chronic Disease Branch Division of Epidemiology
Indian Health Service

Why Is It So Cold in Alaska? Overview of Alaska Native Epicenter Initiatives
Ellen Provost, DO, MPH
Director, Alaska Native Epidemiology Center at the Alaska Native Tribal Health Consortium

Knowledge is Power: A Successful Collaborative Approach to Community Health Profiling
Diana Cournoyer, M.Ed. (Muscow Creek/Oglala)
Intervention and Training Coordinator
Southern Plains Inter-Tribal Epidemiology Center (Oklahoma)

Invisible and Under-funded: Revealing the Health Needs of American Indians in California
Virginia Myers, BA (Yurok/Karuk)
Epidemiology Program Coordinator, California Tribal Epidemiology Center at the California Rural Indian Health Board

11:00 – 12:00 PM  Measuring Up: The Impact of Accreditation Standards, Performance and your Local Tribal Health Department
How can you tell if your tribe, county, or state is a “functional local health department?” This panel will explore developing national public health performance standards which are accreditation standards that would include American Indians and Alaska Natives.

Setting the Bar: Efforts to Establish National Standards for Public Health Departments, Including Tribal Programs
Grace Gorenflo
Senior Advisor, National Association of County and City Health Officials

National Public Health Performance Standards Program
Terese Daub
Public Health Advisor, Office of the Chief
Office of Public Health Practice Centers for Disease Control and Prevention

The To’Hajiilee Community Action Team: A Case Study in Applying National Accreditation Standards to One Native Community
This presentation reviews the work of one South West community to tailor a nationally-developed assessment tool to their needs.

Lora M. Church (Navajo)
Senior Program Manager, Acoma-Cañoncito-Laguna Teen Centers
University of New Mexico
Final Remarks
H. Sally Smith
Chairman, NIHB Board of Directors

Closing Prayer
Andy Joseph, Jr.
Vice-Chairman, NPAIHB
Confederated Tribes of the Colville Reservation
Tribal Council Member

Retire the Colors
Northwest Indian Veterans Association

Adjourn 2007 NIHB Annual Consumer Conference

Thank you for joining us this year!

Please plan to attend the 2008 NIHB Annual Consumer Conference in California
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Tell me what you want for me.
Tell me why I should wait to have sex.

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NIHB BOARD BIOGRAPHIES

NIHB BOARD

Margaret Baha-Walker serves as the Phoenix Area representative on the Board of Directors. Balancing a strong spiritual life along with a compassion for serving her people, Margaret Baha Walker is making political bounds as she has taken a step in being elected the first woman Vice Chairperson for the White Mountain Apache Tribe. She is of the Eagle Clan, the Cottonwood Tree Standing People Clan and born for the Mexican People Clan. Hailing from Seven Mile, a small community on the Fort Apache Indian Reservation, Margaret is your typical Apache woman: a daughter, a sister, a wife, a mother, a traditional god-mother and the greatest blessing of all, a grandmother. Born to the late Martha and Herbert Baha Alchesay, Margaret is the youngest of six children. She is married to Lowell Walker. They have three sons, Joel, Byron and Clay, her daughter in law, Karin, and three grandchildren. They also co-sponsored four traditional Apache Sunrise Dances.

Barbara Bird is Secretary on the Executive Board of Directors and representative for the California Area to NIHB. Ms. Bird is a tribal member of the Concow Maidu Tribe of Moooretown Rancheria located in Oroville, California and sits on the Tribal Council. Ms. Bird is the acting Chairperson of the Feather River Tribal Health Board and is the Chairperson of the California Rural Indian Health Board. Ms. Bird was also a nurse for more than thirty years and remains an active advocate for the improvement of health care for all Native Americans and Alaska Natives.

John Blackhawk serves as the Aberdeen Area representative to the Board of Directors. He is a member of the Tribal Council for the Winnebago Tribe of Nebraska. He has served the Winnebago Tribe since the fall of 1985, serving 7 consecutive terms. During his fifteen years of public office he has served as the Chairman for 11 years beginning in 1988 at the age of 32. Mr. Blackhawk's experience prior to Tribal Government began in youth programs and athletics where he began as a Recreational Specialist in his junior year of high school and worked in the field for 10 years. Previous positions include the first Director of the tribe's Youth Development program in 1985, the Executive Director of the State's Commission on Indian affairs in 1991 and the President of the Little Priest Tribal College for the 1999 academic year. Additional duties include serving on various boards/committees such as the Commission of Education's Indian Advisory council, the Pierre Indian Learning Center Board of Directors, the Winnebago Housing Commission, Chairman and the Aberdeen Area Tribal Chairmen's Health Board, Chairman, Great Plains Tribal Chairman's Association and the Tribal Leader's Diabetes Committee.

Jerry Freddie Navajo Nation and Area Representative to the National Indian Health Board. (Bio not available at time of printing.)

Linda Holt is an enrolled member of the Suquamish Tribe. Ms. Holt has served as a member of the Suquamish Tribal Council for 5 years and presently is the Tribal Council Secretary. In addition, Ms. Holt is the Tribe’s first full-time Legislative Liaison to the State and Federal governments as well as Treasurer of the Board of Trustees for the Suquamish Foundation. Previously, Ms. Holt was the Director of Human Services for the Suquamish Tribe. Ms. Holt also serves tribes regionally and nationally through various health services activities: Ms. Holt is the Chairwoman for the Northwest Portland Area Indian Health Board, a regional Tribal consortium with membership from all of the Tribes in Idaho, Oregon and Washington. Ms. Holt also is the Portland Area representative to the National Indian Health Board, the Tribal Leaders Diabetes Committee and the CDC’s Tribal Consultation Advisory Committee (TCAC), for which she is the national Co-Chair.

Laurel F. Keenan currently serves on the Board of Directors as the Bemidji Area representative. She is an enrolled member of the Bay Mills Indian Community and is of Chippewa descent. Laurel began her health career in 1966 as a Licensed Practical Nurse at the War Memorial Hospital in Sault Ste. Marie, Michigan. Laurel is a Michigan Native and a Licensed Practical Nurse and has attended the Lake Superior State College in Sault Ste. Marie, Michigan, and the Adult Education Center in Saganaw Michigan. She is currently enrolled at Ferris State College in Big Rapids Michigan. Laurel has been working for the Bay Mills Indian Community Tribal Health Administration in Brimley, Michigan since 1975. She is currently the Overall Director of the Bay Mills Health & Human Services System. She has also served in the capacities of Tribal Health Planner, Community Health Representative.

L. Jace Killback serves as a representative of the Billings Area on the Board of Directors. He is a Northern Cheyenne Indian from Busby, Montana currently serving his second term as a Councilman for the Northern Cheyenne Tribe. Mr. Killback received a Bachelors of Arts Degree from the University of California, Berkeley in Native American Studies. While pursuing his higher education in the Bay Area, L. Jace Killback first became involved in health care issues as a board member of the Native American Health Centers of Oakland and San Francisco. Once home on the reservation and as an elected tribal official, L. Jace Killback was appointed as his Tribe’s delegate for the Montana & Wyoming Tribal Leaders Council (MT/WY-TLC) and the Council of Large Land-Based Tribes (CLLBT). Mr. Killback is the Treasurer for both the MT/WY-TLC and CLLBT. Mr. Killback has facilitated Tribal Consultations with SAMHSA, made presentations on suicide prevention, and testified at a senate field hearing on Indian health care. Mr. Killback has served as the Billings Area Representative for the Direct Service Tribes Advisory Committee and the IHS HP/DP Policy Advisory Committee. Currently L. Jace Killback is a member of the Tribal Consultation Advisory Committee for the Center for Disease Control and Prevention and the American Indian/Alaska Native Health Research Advisory Council.
Cynthia Manuel is the Tucson Area representative to the Board of Directors. She is a proud member of Tohono O’odham Nation representing the Great Gu Achi District on the Tohono O’odham Legislative Council (TOLC). Under the TOLC she serves on the Health & Human Services and Budget & Finance and Domestic Affairs Committees. She has previously served at the Vice-Chair of the TOLC. Board Member Manuel has worked in Health Care for 20 years in positions ranging from Community Health Representative to work on Diabetes to work on Dialysis.

Mickey D. Peercy, a Licensed Clinical Social Worker, is the Oklahoma Area representative on the Board of Directors and the Treasurer of NIHB. He resides in Tishomingo, Oklahoma. He and his spouse of 38 years have lived in the same home for 32 of those years. Their only son, daughter-in-law and only grandchild, Maggie live within walking distance of them. He received his Bachelor of Arts degree from East Central State University, Ada, Oklahoma in 1972 and a Masters Degree in Social Work from Oklahoma University in 1982. He began his professional career working with the Youth Services and Juvenile Court system, and later taught social work courses at the college level and practiced in the private sector as a clinical social worker. Mickey began working in Indian country as a Social Worker in a small ambulatory clinic in 1985 when the Chickasaw Nation contracted the program from Indian Health Services. He was the transition officer for the Chickasaws as they compacted all health services in 1994. Mickey became involved in the Self-Governance initiative on both the Area and National level and continues to remain very active. While at the Chickasaw Nation he moved from his social worker role to administering the Behavioral Health Program, to administering the Health System, to administering the Self-Governance, to Chief of Staff. In July of this year (2007), he was appointed as the Executive Director of Health Services for the Choctaw Nation, which includes oversight of the tribal hospital, seven (7) outlying clinics, and the preventative health programs.

Mr. Buford Rolin is the Vice-Chair of the Executive Board and represents the Nashville Area on the Board of Directors. He is a member of the Poarch Band of Creek Indians (formerly known as the Creek Nation East of Mississippi). He has served in capacities of Secretary for the Tribe and has served as the Vice-Chairman from 1991-1999. He is the current Chairman of the Poarch Band of Creek Indians. Mr. Rolin is the Health Administrator for the Tribe. In 1989, Mr. Rolin received a Service area award for Improving the Health of Indian People. In 1993, Mr. Rolin was awarded the Director’s Award for Excellence by the Indian Health Service. In 1996, he also received the Area Director’s Special Commendation Award from the Indian Health Service. Mr. Rolin has served on many national organizations including the National Congress of American Indians (NCAI) as their treasurer from 1979 to 1989. He has held various positions involving the Northwest Florida Creek Indian Council, Atmore Area Partnership for Youth Board of Directors, Florida Governor’s Council on Indian Affairs, the National Committee on Indian Work, the Episcopal Church, the Chamber of Commerce Board of Directors, Creek Indian Arts Council, Creek Indian Heritage Memorial Association, the United South & Eastern Tribes (USSET) and the National Indian Health Board (NIHB). He currently serves on the State of Alabama Public Health Advisory Board in Montgomery, Alabama and is also a current member of the USSET Health Committee.

Lester Secatero is the Member-at-Large of the Executive Committee of the National Indian Health Board. He is To’Hajiiłce (Canóncito) Navajo and grew up herding sheep for his grandfather before serving with the Army in Vietnam. He has been the Pastor of The Jesus Church at To’Hajiiłce for the past twenty three years. Mr. Secatero has served the To’Hajiiłce Chapter in a number of different capacities. He is a member of the Chapter health board and was the Chairman of the Acoma/Canóncito/Laguna Service Unit Health Board for three years. Mr. Secatero has served on the Albuquerque Area Indian Health Board for the past four years and was elected Chairman in 2004. He has been married to his wife Betty for over thirty years and is a father and grandfather.

H. Sally Smith has served the health care interests of American Indian and Alaska Native people in a variety of capacities over the past three decades. Ms. Smith was elected to serve as the Chairperson for the National Indian Health Board’s (NIHB) Board of Directors in December 1999. Ms. Smith also serves as the Chairperson for the Alaska Native Health Board, a position she has held since 1998. She also presides as the Chair for the Alaska Native Medical Center Joint Operating Board, the Bristol Bay Area Health Corporation and serves as the Sergeant at Arms for the Alaska Native Tribal Health Consortium. Ms. Smith is the National and Alaska Representative to the Tribal Self Governance Advisory Committee, the National Representative to the Tribal Leader’s Diabetes Committee and a member of the National Steering Committee for the Reauthorization of the Indian Health Care Improvement Act. Sally serves as 3rd Chief of the Native Village of Dillingham and a Tribal Judge. In 1997, she was the recipient of the Alaska Federation of Natives Health Award and in 1998 she received the National Indian Health Board’s highest recognition, The Jake White Crow Award. Sally was born and raised in Clarks Point, Alaska and currently resides in Dillingham, Alaska. She is Yupik Eskimo and the mother of four sons.
NIHB STAFF BIOGRAPHIES

Stacy A. Bohlen, an enrolled member of the Sault Ste. Marie Tribe of Chippewa Indians, is the Executive Director of National Indian Health Board (NIHB) and serves the Board as an advisor. A 20-year veteran policy professional of Washington, DC, she began her policy career as a Legislative Assistant to US Congressman Bob Taucher of Michigan. Ms. Bohlen then spent nearly a decade as the lead advocate for the American Osteopathic Association, the organization representing more than 42,000 osteopathic physicians and their patients across the nation. She also served as the Education Director for the New York Institute of Technology, College of Osteopathic Medicine’s graduate medical education consortium of 19 academic medical centers. Prior to joining the NIHB, Ms. Bohlen was the Director of Federal Relations for the American Indian Higher Education Consortium. Ms. Bohlen received her Bachelor’s degree in Political Science from Oakland University in Rochester Hills, MI and Master’s in Government, ART from Johns Hopkins University, Baltimore MD.

Helen Canterbury is the Events Coordinator and Manager of Administration at the National Indian Health Board. Helen graduated from Fletcher Nursing School with a Licensced Practical Nurse diploma. Prior to her work with NIHB, Helen worked as Office Manager, Senior Administrative Assistant and Event Planner for various departments at Fannie Mae. She also worked as the Accounts Manager for Office Care, Inc. Her son, Joseph, is an enrolled member of the Cherokee Nation of Oklahoma and was born at the Crow Agency in Montana.

Steven M. Griggs is the Legislative Associate for National Indian Health Board. He is a graduate of Texas Christian University and the American University, Washington College of Law. While attending law school, Steve served as a legal intern with the United States Senate Committee on Indian Affairs under Senator Byron L. Dorgan of North Dakota. Steve assisted the Staff Director and General Counsel of the Committee on Indian Affairs with various issues important to Indian Country such as Indian trust reform, health care, and the nomination of an Assistant Secretary for Indian Affairs with the U.S. Department of the Interior. In addition, Steve served as a legal intern to U.S. Rep. Lloyd Doggett of Texas where he assisted the Congressman’s Ways & Means counsel on issues such as pension reform, immigration, and federal grant programs. Steve is a member of the Northern Cherokee Nation of Missouri & Arkansas.

Colette Keith is the Legislative and Policy Associate for Medicare and Medicaid Programs for National Indian Health Board. She has a Bachelors degree in communication from the University of North Dakota. Previous to joining NIHB, she served as the Administrative Officer for former Tribal Chairman Gregg J. Bourland. She has also worked closely with Carole Anne Heart, Executive Director of the Aberdeen Area Tribal Chairman’s Health Board. Collette was first native woman anchor at the ABC affiliate KOTA in Rapid City, South Dakota. She is a member of the Cheyenne River Sioux Tribe: a Lakota from South Dakota. She has two daughters: Meredith, a junior pre-med major at Creighton University in Omaha, NE., and Lucy, a junior in high school.

Kitty E. Marx currently serves as the Legislative Director of the National Indian Health Board. Ms. Marx is responsible for developing, planning and implementing the legislative priorities and strategy for the NIHB. She provides legislative and policy research, technical reports, and data analysis for use by the NIHB in the development of briefing documents, policy memoranda, and position papers on important health topics impacting health care for American Indians/Alaska Natives. Ms. Marx received a Bachelor of Arts in History from the University of Maryland, College Park, and a Juris Doctor degree from Vermont Law School. Prior to her position with NIHB, Ms. Marx worked for the Indian Health Service (IHS) as the Branch Chief of the Policy Liaison Team, Division of Regulatory Affairs (DRA).

Lisa C. Neel serves as the Deputy Director of Public Health of the National Indian Health Board. Ms. Neel received her Bachelor degree in Molecular, Cellular and Developmental Biology from Yale University and her Master of Public Health degree in Maternal and Child Health from George Washington University. Prior to her service to NIHB, Ms. Neel was a project manager, team lead on public health at Native American Management Services, where she developed public health communication programs on HIV, SIDS, and tobacco control. Ms. Neel was born and raised in Tulsa, Oklahoma and is a citizen of the Cherokee Nation.

Phillip Roulain is the Administrative Assistant of the National Indian Health Board. Phillip has over 16 years of customer service experience which includes retail management, database and website creation, office management, community education and outreach, human resources, training development and implementation, graphic art and printed materials production, community coalition development, event planning and coordination. Phillip has served as a member of several Native American HIV/AIDS groups in Oklahoma and maintains strong ties with them. Phillip is a member of the Kiowa Tribe of Oklahoma and was raised in the City of Anadarko.

Lawrence Shorty is the Director of Public Health Programs (CDC). He holds is Master of Public Health degree in Community Health from the University of New Mexico. He worked previously with the Academy for Educational Development and the Centers for Disease Control Prevention Research Centers at the University of New Mexico and the University of North Carolina at Chapel Hill. His early work was in the area of Indigenous tobacco control and serves on the Indigenous Peoples Forum on Tobacco Use for the World Health Organization. Mr. Shorty is of the Navajo Nation.
provisions contained in the Medicare Modernization Act of 2003, and has been an active participant in the implementation of that law in Indian Country. She was appointed by the Nashville Area as a technical advisor to the Tribal Technical Advisory Group which advises CMS on Indian health issues vis-à-vis Medicare and Medicaid.

Jay T. Barton is a technical assistance provider and training specialist with the National American Indian Housing Council. During the past 3 years Mr. Barton has conducted nearly 100 seminars on the dangers of methamphetamine laboratories and the harmful effects within areas where methamphetamines are used and produced. Nearly 6,000 individuals have attended Mr. Barton's seminars or have received technical assistance to combat methamphetamine use in Indian Country. Jay is a 17-year veteran of Oklahoma law enforcement. He served as a Captain with the Absentee Shawnee Tribal Police Department’s Training Division and as the Captain of the Absentee Shawnee Housing Authority Division of the Tribal Police Department. Throughout his career, he has worked closely with the Pottawatomie County District Attorney’s 23rd Judicial District Drug Task Force.

Mirtha Beadle, MPA, Deputy Director, HHS Office of Minority Health, is the Deputy Director of the Office of Minority Health, U. S. Department of Health and Human Services. The Office of Minority Health is the federal focal point for addressing the health status and quality of life for African Americans, Hispanics, Asian Americans and Pacific Islanders, and American Indians and Alaska Natives. As Deputy Director, Ms. Beadle serves as principal advisor to the Deputy Assistant Secretary for Minority Health in planning, developing, and implementing policies, programs, and activities to achieve the Secretary’s goals for improving minority health, eliminating health disparities, and ensuring coordination of Departmental efforts related to minority health. She also is responsible for strategic planning, evaluation efforts, and overseeing OMH operations and programs. Ms. Beadle was born in Cuba and emigrated to the United States at a young age. She holds a Master of Public Administration from Western Michigan University and a Bachelor of Science in Management Systems from Andrews University.

Del Beaver (Muscogee Creek Nation of Oklahoma) is an Environmental Specialist II for the Muscogee (Creek) Nation of Oklahoma. He has earned a B.S. in Environmental Management and a M.S. in Industrial Operations. Mr. Beaver is a state licensed Lead-Based Paint Inspector/Risk Assessor and Asbestos Inspector and has attended the Drug Lab Decontamination Supervisor and Worker course through the State of Oregon. In addition, he is a member of The Institute of Hazardous Materials Management as a Certified Hazardous Materials Manager and a member of The National Environmental Health Association as a Registered Environmental Health Specialist/Registered Sanitarian.

Rhonda K. Beaver (Creek/Cherokee) is the Medical Billing Supervisor for Muscogee (Creek) Nation of Oklahoma overseeing third party reimbursement for five outpatient facilities and a community hospital. During her tenure in this capacity, collections have increased by 63%. Rhonda received her BS in Business and MS in Human Resources from East Central University, Ada, Oklahoma. Her experience also includes accounts receivable with Wewoka Indian Health Center and Chickasaw Nation of Oklahoma. She has been employed with Creek Nation for 2 years in various capacities such as Patient Information Supervisor and Health System Administrator.

Carlye Begay, MHSM, serves as Vice President and Chief Development Officer of American Indian Health Management & Policy. He has experience in the management of health care organizations, managed care, health care market structure, and health care delivery. Most recently, Mr. Begay worked for AmeriChoice, a business unit of UnitedHealth Group, which serves more than 1.3 million beneficiaries of government health care programs. In his position with AmeriChoice, Carlye helped to develop and implement AmeriChoice’s Medicare and Medicaid products. Mr. Begay completed his bachelor’s at the University of Arizona and is currently completing his Masters in Health Sector Management at the W.P. Carey School of Business with Arizona State University.

Notah Begay III, the only full-blooded Native American on the PGA Tour, was born and raised in Albuquerque, New Mexico. A 3-time All American teammate/roommate of Tiger Woods, Notah secured a scholarship to Stanford University where he earned a degree in Economics in addition to leading the golf team to a National Championship in 1994. Notah’s accomplishments on the golf course speak for themselves. In addition to winning 3 PGA Tour tournaments, Notah became only the third player in the history of professional golf to shoot 59 in a professional event at the 1998 NIKE Dominion Open. Notah’s efforts off the golf course are as admirable as his accomplishments on the golf course. Notah is a National Spokesperson for the Boys & Girls Clubs of America and leads the fight against diabetes by encouraging Native communities to pursue healthier lifestyles. In addition, Notah serves as co-Chairman of the New Mexico Council on Physical Fitness and launched an initiative called Notah Begay III Foundation in 2005 aimed at getting today’s youth active through soccer and golf programs.

Evanne Bennett, BA, is part of the HIV/AIDS Capacity Building Division at the Office of Minority Health Resource Center (OMHRC). The OMHRC focuses on six content areas of Technical Assistance (TA) for Federal/State agencies, non-profits and community based organizations. TA areas include organizational infrastructure assistance, cultural competency assistance, community outreach services, programmatic design, training requests, and communications assistance. Before joining the OMHRC, Ms. Bennett was the National Minority Marketing Consultant for the National Minority Donor Program. In that capacity, Ms. Bennett formed collaborative efforts, implemented various initiatives and developed volunteer programs with Native organizations, non-profits and communities.

Spice Bighorn currently serves as the line officer for the Billings Education Line Office within the Bureau of Indian Education. Mr. Bighorn has previous work experience as the Tribal Education Director, Tribal
Executive Board Member and Tribal Chairman of the Assiniboin and Sioux Tribes of the Fort Peck Reservation, as well as serving as an Elementary School Principal in Brookton, Montana. In addition, Mr. Bighorn also served as a College Speech Instructor at Fort Peck Community College in Poplar, Montana and most recently as the Superintendent of the Fort Peck Agency, Bureau of Indian Affairs, also located in Poplar, Montana. Mr. Bighorn, an enrolled member of the Assiniboin and Sioux Tribes of the Fort Peck Reservation, is a native of Brookton, Montana and received a Bachelor’s of Science Degree in Communications Education from Dickinson State University of Dickinson, North Dakota in 1983, and a Master’s of Business Administration from Gonzaga University in Spokane, Washington in 2005. Mr. Bighorn’s hobbies include golf, basketball and officiating high school basketball games.

Vickie L. Blythe, RN, BSN, is the Health Operations Director for the Eastern Band of Cherokee Indians in Cherokee, North Carolina. She has been a registered nurse and worked with various Indian Tribes as an Indian Health Service Nurse for ten (10) years and has been with the Eastern Band since 2001. Ms. Blythe also serves as the Emergency Preparedness Coordinator for the Health and Medical Division of the Eastern Band of Cherokee. She is responsible for the operations of twenty one (21) tribal health programs, and develops and coordinates the emergency preparedness activities for the public health component of the Tribe. She currently chairs the Western North Carolina Emergency Preparedness Committee which is a regional group that coordinates emergency preparedness activities in Western North Carolina and the Cherokee Indian Reservation. Ms. Blythe is an enrolled member of the Eastern Band of Cherokee Indians.

David Boyd, MDCM, FACS, is a trauma surgeon and former National Director of Emergency Medical Service Systems (IHEW/ DHHS) 1975-83 and a Former General Surgeon and Clinical Director of the Blackfeet Community Hospital in Browning, MT. He is currently the National Trauma Systems Coordinator and an honorary member of the Blackfeet Nation.

Kay Branch has a master’s degree in applied anthropology with a focus on American Indian & Alaska Native elders and long term care services. She has worked in Alaska Native long term care for 12 years, currently as the Elder/Rural Health Program Coordinator for the Alaska Native Tribal Health Consortium. In that role she works with all tribal health organizations in the state to promote and develop long term care services. She is also the technical advisor for the IHS Elder Care Initiative Grant project.

Joe Bray works for the Statistician Core Capacity Program of Choctaw Nation. Joe joined as the program statistician and Tribal Self Governance Specialist in May, 2004. He earned his degree in Economics from Northwestern Oklahoma State University.

Maxine Brings Him Back-Janis, MPH, RDH is a visiting Assistant Professor in the Dental Hygiene Department of Northern Arizona University. Currently, Maxine is the Director of the Hopi Project, responsible for coordination of clinical rotations to the Indian Health Service, Hopi Health Center Dental Clinic. Maxine is actively involved in recruitment of American Indians into health professions. Maxine is a licensed Registered Dental Hygienist and received her undergraduate education from Yankama Valley Community College, and Eastern Washington University. She holds a Master’s degree in Public Health from Portland State University. Maxine’s career spans public health, private practice, and academia. She has presented and speaks passionately on the subject of holistic health and wellness.

Rear Admiral Eric B. Broderick D.D.S., M.P.H., currently serves as the Deputy Administrator (Chief Operating Officer), for the Substance Abuse and Mental Health Services Administration (SAMHSA). As Deputy Administrator, RADM Broderick shares responsibility with the Administrator for providing executive direction and leadership to a staff of approximately 528 with a fiscal year budget of approximately $3.3 billion.

Joseph Bryson has been employed with the Centers for Medicare and Medicaid Services (CMS) in the Center for Medicare Management for the past 4 years. He entered CMS on the Outstanding Scholar program with a Bachelor’s Degree in Economics from Towson University and has obtained his M.B.A. from The Loyola College in Maryland. He has been the lead analyst for the Outpatient Prospective Payment System Pricer software and has been an active participant on the Outpatient Code Editor Workgroup. Recently, Joe has been working closely with billing and claims processing under the various inpatient prospective payment systems.

Pearl Capoeman-Baller, a Quinault Tribal member, is the former President of the Quinault Indian Nation, and now serves her Tribe in the Planning and Public Works Department. She is married to John Baller, has two children, and one granddaughter named Chase McKenzie. Pearl served as a Quinault Tribal Council member since 1970, serving the last 13 years as President of the Tribe. Pearl finished high school, attended college, and then took a position as an administrative secretary for the Nation. At the age of 19 Pearl was elected to serve on the Tribal Council and has held several officer positions on the Council: Tribal Secretary, Vice President, and President from 1993-2006. Pearl has received many acknowledgements and awards in recognition for her contributions to Indian Country. She was awarded by the National Indian Health Board for her many years of service; was chosen as the delegate of the year by the Northwest Portland Area Indian Health Board for 1991 and 1996; was one of several Indian women honored at a conference hosted by the Pine Ridge Sioux; was honored by the Chippewa Cree for being an outstanding leader; Was one of sixteen tribal leaders selected to participate in the first ever Tribal White House meeting; participated as a key tribal leader in the first ever National Tribal Listening Conference; received certificates throughout her leadership from the Indian Health Service for serving on numerous task forces; was selected to testify before Congress, and was a Native American delegate at the National Democratic Convention in 1996 and 2000.

Colleen Friedlander-Cawston, MPA serves as the Director for the Washington State Department of Social and Health Services (DSHS), Office of Indian Policy and Support Services. As Director, she is responsible to meet with the 29 Federally Recognized Tribes of Washington State the 6 Recognized American Indian Organizations and the Administrations of DSHS. During her career she has been both provider and administrator of health programs for their tribe in excess of 18 years. Her provider roles included Health Educator, WIC Certifier and Community Health Representative. As the Tribes Health Administrator she was responsible for providing oversight to the Tribes clinics, public and community health direct services, and long term care facility. Colleen is an enrolled member of the Colville Confederated Tribes located in the North Central Region of Washington State. She is married to Rodney Cawston, and they have raised four children; their nephew Reynaldo (31), daughter Clarissa (27), son Tyrique (22), and daughter Arielle (17). Colleen earned her undergraduate degree from Eastern Washington University (1992) in Community Health, and was among the first class to graduate from The Evergreen State College (2002) with a Master’s in Public Administration – Tribal Governance.

Tommy Chesbro, MHR, AASECT is the Vice President of Education for Planned Parenthood of Arkansas and Eastern, OK. He has a master’s degree in Human Relations and is a Certified Sexuality Educator with the American Association of Sexuality Educators, Counselors, and Therapists. He serves on the Board of Directors for the National Minority AIDS Council and the Ethnic, Minority Advisory Committee for the NIH Office of AIDS Research. Mr. Chesbro has been living with HIV for 22 years and has been working in the AI/AN community on this issue for the last sixteen years. He is of Cherokee and Lumbee heritage.

Lora M. Church (Navajo) Ms. Church works as a senior program manager for the UNMI Acoma Carineto-Laguna (ACL) Teen Centers, two school based health centers located at To’hajiilee Community School and at Laguna/Acoma Mid/Senior High School with health education/substance abuse prevention programs offered in five area elementary schools. She oversees the substance abuse/health education services and currently serves as the Secretary/Treasurer for the To’Hajiilee Community Action Team. She is a graduate student with UNMI’s Masters of Public Administration and Health Education. She, her husband, Casey Church, and their five children reside in Albuquerque, New Mexico.

Nathaniel Cobb, MD received his B.S. in Chemistry from Fort Lewis College in Durango, Colorado, his M.D. from Harvard Medical School, and completed a Family Practice residency at the University of New Mexico. Dr. Cobb began his career with the Indian Health Service in 1987 as a family physician assigned to the Zuni PHS Hospital in Zuni, New Mexico. After serving as an Epidemic Intelligence Service Officer with CDC in Atlanta, Georgia, he returned to IHS in 1992 to direct the Cancer Prevention and Control Program. He is now the Chief of the Chronic Disease Branch with the IHS.
Division of Epidemiology in Albuquerque, and Chair of the IHS Tobacco Control Task Force.

Jocelyn Cook, Ph.D., is Manager of Research Coordination for the First Nations and Inuit Health Branch, Health Canada and holds an adjunct faculty appointment in Obstetrics at the University of Ottawa. Dr. Cook was an academic basic Science researcher for 10 years before completing an MBA and moving into the field of health policy and research coordination.

Diana Cournoyer is enrolled Muscogee Creek and a member of the Ogala Sioux Nation in South Dakota. Her background includes experience in education and substance abuse counseling in Oklahoma and South Dakota. She has worked closely with many tribes in Oklahoma and continues to do so in her present position. Diana entered the American Indian public health field at the state coordinator of the Native American Tobacco Education Network (NATEN) with the Oklahoma City Area Tribal Health Board. During her first year, Diana influenced many changes to the Oklahoma State Health Departments protocol when working with Native American commercial tobacco users. Diana has continued to work in the public health field by taking a position with the Southern Plains Inter-Tribal Epidemiology Center.

James Allen Crouch, a member of the Cherokee Nation, is Executive Director of the Sacramento-based California Rural Indian Health Board, Inc a position he has held since 1987. Mr. Crouch received a Bachelor of Arts degree from American University, Washington, D.C. and a Master of Public Health from the University of California, Berkeley. Mr. Crouch’s board affiliations include serving as a founding and now Emeritus member of the California Endowment Board California’s largest Health foundation. He is currently Board Chair of the California Pan Ethnic Health Network. Other Board and Advisory affiliations include The National Health Association, California Task group on Multicultural Competence, California Telehealth/Telmedicine Coordination Project; the California Health Information for Policy Project, the Cherokees of Northern California Club and the American Leadership Forum. He has served on numerous advisory groups to the Federal Indian Health Service; including the Negotiated Rule Making Committee for the Indian Self-determination Act and the Level of Need Funded Task group; for which he serves as Tribal Co-Chair. He is currently the California Representative to the Center for Medicare and Medicaid Services Tribal Technical Advisory Group.

Teresa Daub has worked in public health for over fifteen years in local, state, and non-profit settings in South Carolina, Maryland and Georgia. She currently works with the National Public Health Performance Standards Program (NPHPP) in the CDC’s OCM office of Chief of Public Health Practice. She has coordinated many community-based initiatives, including a peer education program at Clemson University and a partnership forum for substance abuse prevention in Howard County, Maryland. Prior to joining CDC, Teresa spent five years with the DeKalb County (Georgia) Board of Health as their Planning and Partnership Development Coordinator with responsibility for convening and facilitating Mobilizing for Action through Planning and Partnerships (MAPP). Healthy DeKalb, a community health improvement coalition focused on addressing health disparities and obesity, was born through this work.

Valerie J. Davidson, Esq., is the Senior Director of Legal and Intergovernmental Affairs for the Alaska Native Tribal Health Consortium based in Anchorage, Alaska. She has managed the development of a Medicaid managed care project for 28,000 people in the Yukon-Kuskokwim Delta and, through this endeavor, greatly expanded access and quality of health care. Ms. Davidson served as a non-voting member of Secretary Lewit’s (US Department of Health and Human Services) Medicaid Commission. She is the Chair of the Centers for Medicare and Medicaid Services Tribal Technical Advisory Group (TTAG) and serves on the Medicaid & Medicare Policy Committee of the National Indian Health Board. Most importantly, Ms. Davidson is the mother of two adorable daughters.

Lemoy DeBruyn, Ph.D., is a French Canadian from Upper Michigan, and serves as Field Director/Senior Scientist with the Native Diabetes Wellness Program at CDC. She helped develop the Eagle Books and has worked with the Diabetes Education in Tribal Schools Project for 6 years as a federal partner. She assists with evaluation, scientific oversight, and marketing of the curriculum.

Eugene L. DeLorme, Esq. (Turtle Mountain Band of Chippewa) is an Assistant Professor of Family Medicine, the Director of the Indians into Medicine Program, as well as a trainer for the ICWA, Child Welfare Practitioner Certification Program, Children and Family Services Training Center, University of North Dakota. Additionally, he is an assistant Dean of the University of North Dakota School of Law and is licensed to practice law in North Dakota and Minnesota.

David de Voursney is currently a Presidential Management Fellow at the Substance Abuse and Mental Health Services Administration working on the Safe Schools/Healthy Students program. Originally from Charlottesville, Virginia, Mr. de Voursney has a bachelor’s degree in psychology from Earlham College and a master’s degree in public policy from the University of Michigan. He has worked with children and youth as a case manager providing services to children and families facing mental illness and as a residential counselor with youth involved in the justice system.

Carolee Dodge-Francis, Ed.D., is a member of the Ojibwe Tribe of Wisconsin and serves as Executive Director of the American Indian Research and Education Center at the University of Nevada, Las Vegas. She has worked on the Diabetes Education in Tribal Schools project for 6 years developing lessons and providing professional development to teachers, scientific oversight, evaluation and marketing of the curriculum.

Jason Dollarhide is a descendent of the Cherokee Nation of Oklahoma, the Shawnee Tribe of Oklahoma and an enrolled member of the Peoria Tribe of Oklahoma. Mr. Dollarhide is currently the 2nd Chief of the Peoria Tribe of Oklahoma. He is employed full-time as the Deputy Executive Director of the Peoria Tribe Housing Authority. Mr. Dollarhide is the proud father of Jace (11) and Jadhyn (6), who lives with severe Cerebral Palsy. Giving Jadhyn and all children who live with a disability a better quality of life is what drives Mr. Dollarhide’s volunteer work. He wants to ensure that his own and other families have the information and support they need to thrive within both tribal and mainstream societies. For this reason, Mr. Dollarhide also volunteers his time to the National Congress of American Indians as the Chair of the Sub-committee on Disability, which he describes as an exciting challenge and great honor.

Jon Dunbar-Cooker began his prevention career at the National Network for Runaway and Homeless youth as project coordinator for the Administration for Children, Youth and Families (ACYF) youth in high risk situations project, providing technical assistance (TA) for alcohol, tobacco and other drug (ATOD) abuse prevention and treatment programs and HIV/AIDS prevention programs for youth in crisis situations. Currently, he serves as a public health advisor for CSAP, Division of State and Community Assistance, administering and monitoring the 20 percent set aside of the Substance Abuse Prevention Block Grant, State Incentive Grants, and the Strategic Prevention Framework State Incentive Grants for Arkansas, Colorado, Nebraska, Louisiana and the Cherokee Nation. Mr. Dunbar-Cooker also serves on the SAMHSA Co-Occurring Matrix Workgroup, the Co-occuring Policy Academy and Native American Co-occuring Policy Academy Workgroups, and the Co-occurring Medications Workgroup.

Ms. Dorothy Dupree serves as the Director of the Tribal Affairs Group in the Office of External Affairs, Centers for Medicare and Medicaid Services (CMS). As Director, she reports to the Administrator of CMS and has responsibilities to assist the Agency in addressing the Indian Health policy related to Medicare, Medicaid, and State Children’s Health Insurance Program (SCHIP). In 1989, Ms. Dupree began her federal career with the Indian Health Service. Office of Tribal Activities, Albuquerque Area. In 1995, she was appointed the Executive Officer for the Albuquerque Area, one of the top three management officials, covering New Mexico, Colorado and Texas. In this position, she was responsible for the fiscal and administrative leadership of the Area, providing oversight to the management of five hospitals, eleven health centers, twelve field clinics, and a Youth Regional Treatment Center. Ms. Dupree obtained a Masters in Business Administration from the University of Arizona and a Bachelor of Science in Education from the University of North Dakota.

Jack Edmo, Jr. B.S. was born into a ranching and rodeo family on the Blackfeet Reservation in north central Montana. He grew up on the east slope of Glacier National Park where there was ample space and time for hunting, riding, and learning from his grandparents about ranch life. Being raised by his grandparents had a tremendous impact on his world view. Mr. Edmo’s ongoing commitment to teaching and learning is a passion that has led him to positions within the Indian Health Service, as a hospital and patient educator, conference trainer, and to the Bureau of Indian Education as the
SPEAKERS CONTINUED

ADVT/HIV AIDS Education Specialist. Through cultural gatherings, social events, and national conferences Mr. Edmo continues to impact children of all ages across many reservations.

**Antony J. Ernst, Ph.D.** serves as the Director of Technology Transfer for COCE at The CDM Group, Inc. He provides national leadership and oversight for strategic planning of technical assistance addressing service and systems issues to enhance capacity to address co-occurring disorders. Target audiences include cities, counties, tribes and tribal organizations, community based providers, educational establishments, criminal justice entities, and other social and public health providers. Dr. Ernst also directs COCE’s efforts to establish collaborative relationships with local, state, and federal partners. As a content expert in co-occurring disorders, Dr. Ernst provides training and consultation as needed, and frequently serves as an expert speaker at national and regional meetings. Dr. Ernst is a licensed advanced clinical social worker and licensed chemical dependency counselor.

**Jill Shepard Erickson, MSW, LCSW** is an enrolled member of the Santee Sioux Tribe of Nebraska, and of the Chugach Native’s Association of Alaska. She has earned BS and MSW degrees from Portland State University in Portland Oregon. She retired from the Substance Abuse and Mental Health Services Administration (SAMHSA) in 2006, having worked for SAMHSA from 1997 to 2006 as a project officer for tribal and western state grants to transform community-based systems of care for children’s mental health. The administration of the Circles of Care grants for tribes, urban Indian programs and tribal colleges and universities to engage community members in designing, and evaluating a culturally respectful system of care for children, youth, and families was a primary responsibility at SAMHSA. She previously worked for Indian Health Service from 1983 to 1997 in administrative and direct service positions in Rosebud SD, Albuquerque NM, Pendleton OR, and Phoenix AZ.

**Joe Finkbonner** (Lummi) Executive Director, Northwest Portland Area Indian Health Board. Prior to his current position as the Executive Director of Northwest Portland Area Indian Health Board, Joe was the Director of the Northwest Tribal Epidemiology Center (The EpC) at the Northwest Portland Indian Health Board. The EpC is one of 11 epidemiology centers nationally that focuses specifically on American Indian/Alaska Native health issues. Joe began his work in Indian health for the Lummi Tribe as the Health Director/CFO and was very active at State and Federal levels in his efforts to heighten the awareness of disparities of the AI/AN population and to assist with focusing action toward improving the health status through policy development. Mr. Finkbonner’s efforts were through his membership on the Washington State Board of Health, participation in the Washington Public Health Improvement Plan, and miscellaneous workgroups for the Indian Health Service. Joe began his work in health care delivery as a pharmacist at Providence Medical Center in Seattle and Overlake Medical Center in Bellevue. Joe holds a Masters of Health Administration and a Bachelor of Science in Pharmacy both from University of Washington. Joe is a member of Lummi Nation.

**Cecilia Fire Thunder** is the coordinator for the Native Women’s Society of the Great Plains and a former President of the Oglala Sioux Tribe. Cecilia is a former nurse with long history of working in Indian health first in the urban community of Los Angeles where she helped start the American Indian Free Clinic in the 70’s, then on to San Diego where she led the move to restructure the urban clinic changing the name and location in the mid 70’s where it is still providing care. In 1987 Cecilia returned to her home on the Pine Ridge Reservation after relocating in 1963 where she immediately put her skills in organizing to address needs of Oglala Lakota Womyn. The Oglala Lakota Womyn’s Society started the movement to end violence against Oglala womyn with Pine Ridge being the first reservation in the country to adopt a comprehensive tribal code to address violence against its womyn citizens. After serving as the President of the Oglala Sioux Tribe, Cecilia returned to the continued work to end violence against Indian womyn with an emphasis on ending rape / sexual assault against adult Indian womyn.

**Sharon Fleming, A.A.S., B.G.S.** is Choctaw/ Cherokee and a member of the Choctaw Nation of OK. Ms. Fleming is the former NARA Women’s Wellness Program Director; a CDC NRBCEDF funded Tribal Program and presently is serving as Pacific Northwest Liaison for the Choctaw Nation and NARA Consultant in policy and healthcare advocacy.

**Linda Frizzell, Ph.D.** has extensive practice in rural and Indian health care administration. She holds a doctorate in degree in psychology, education administration, and gerontology. Her endeavors have included a broad range of professional preparations both in medicine and education, dedicated to improvement of quality of life across the life span. She has provided numerous testimonies in regard to health care policy, health issues, and tribal consultation. Her specialties include: Health Services Administration, Tribal Clinic Management, Rural & Indian Health Policy and Legislation, Health and Education Research, Behavioral Health, Community Assessment, Evaluation, Exercise Physiology, Health Education, Physical Therapeutic Services, Service Learning Administration, Senior Corps Administration, and Therapeutic Recreation.

**Joe Garcia** is the President of the National Congress of American Indians (NCAI), the largest national Indian organization representing over 250 member Tribal Nations from throughout the United States. Actively involved in NCAI since 1995, Joe Garcia served two, two-year terms as the 1st Vice President of NCAI prior to being elected President in November of 2005. Joe just completed his 3rd term (Jan 2005- Dec 2006) as Governor of Oglak Owingih (San Juan Pueblo), located in northern New Mexico. After his term as Governor he was elected as Chairman of the All Indian Pueblo Council (AIPC), the organization which was formed in 1598 and serves the 19 Pueblos of New Mexico. He will serve as Chairman for 4 years (2007-2011).

**Jacqueline S. Garner** serves as the Administrator for the Consortium for Medicaid and Children’s Health Operations (CMCHO). As the CMCHO Administrator, she serves as the field point for all activities relating to Medicaid, the State Children’s Health Insurance Program and all interactions with States and local governments. Jackie implements the national Medicaid program and fiscal policies and procedures which support effective State program administration and beneficiary protection. Through Jackie’s innovative leadership CMCHO has strengthened and improved regulations and policies that directly govern the financial operation and management of the Medicaid Program and the related interaction with the states. Jackie has promoted increased accountability within the regional offices in order to enhance the field’s presence within CMS as well as with the State Medicaid offices. Jackie joined the Centers for Medicare and Medicaid Services (CMS) as the Chicago Regional Administrator in 2003. She holds a Master’s degree and came to CMS with over twenty years of experience in health and human services.

**Jacqueline Geddes, Ph.D.** has been with NARA NW since October of 2005. Originally serving as the mental health program manager, she is now the project director for NARA’s SAMHSA-funded Native Youth Suicide Prevention Program/No More Fallen Feathers. She is Sicangu Lakota; an enrolled member of the Rosebud Sioux Tribe. She has a Ph.D. in Counseling Psychology from Washington State University and is a Licensed Psychologist in Washington State. She combines her 10+ years of clinical experience with a background in public health having worked for 6 years at the Spokane Regional Health District.

**Cynthia Gillaspie** (Caydi) is the Native American Contact for the Centers for Medicare & Medicaid Services (CMS), Region VIII, Denver. She also serves as the Lead Native American Contact for coordinating efforts of all the 10 CMS regions. Prior to her current position, Caydi worked for 15 years for the State of Wyoming, Department of Family Services in several positions including Eligibility Technician, County Supervisor and State Medicaid Eligibility Analyst. In 1998, Ms. Gillaspie joined CMS Region VIII and served as the Medicaid State Lead for Colorado, Utah, South Dakota and Wyoming and the SCHIP State Lead for Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming.

**Roger Goodacre** has been with CMS for over thirty years with experience in both the Medicare and Medicaid programs as well as in public affairs and outreach for the Agency. He has been with the Tribal Affairs Group since late 2006 and previously had extensive experience working with the IHS and tribes in implementing Medicare’s Part D benefit.

**Richard A. Goodman, M.D., J.D.** is Co-Director of the Public Health Law Program, Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia. Dr. Goodman received his medical degree and completed a residency in internal medicine at the University of Michigan in Ann Arbor, and earned a law degree at
Emory University in Atlanta. He is Board Certified in both Internal Medicine and Preventive Medicine. A Commissioned Officer in the U.S. Public Health Service during 1978-2006, Dr. Goodman held the grade of Medical Director (Captain: O-6). Following completion of his internal medicine residency in 1978, he joined CDC's Epidemic Intelligence Service Program and has remained on that agency's staff in assignments to the Georgia Department of Human Resources and to the UCLA School of Public Health; he served as Editor of the MMWR during 1988-1998. Dr. Goodman also holds appointments as Professor (Adjoint) at the Rollins School of Public Health and at the School of Law, Emory University, and at the College of Law, Georgia State University. Dr. Goodman has published on a broad range of topics in applied epidemiology which span surveillance and outbreak investigations of acute infectious diseases, to population-based studies of the epidemiology of homicide, and the law of public health. He also is the lead editor of Law in Public Health Practice, published by Oxford University Press. Dr. Goodman resides in Decatur, Georgia, with his wife Deborah Koval, son Zachary, and daughter Brooke; he plays and has co-authored a book on golf.

Charles W. Grim, D.D.S., is a native of Oklahoma and a member of the Cherokee Nation of Oklahoma. As the Director of the Indian Health Service (IHS), he is an Assistant Surgeon General and holds the rank of Rear Admiral in the Commissioned Corps of the Public Health Service. He was appointed by President George W. Bush as the Interim Director in August 2002, received unanimous Senate confirmation on July 16, 2003, and was sworn in by Tommy G. Thompson, Secretary of the Department of Health and Human Services (HHS), on August 6, 2003, in Anchorage, Alaska.

Marcus Guinn: Better known as "Eatee One," Marcus Guinn (pronounced 'Gun') is Osage, Ponca, and Puerto Rican and lives in Oklahoma City. Marcus is a motivational speaker, trainer, and hip-hop artist who knows firsthand some of the struggles that plague Native people. As a young adult he made a decision to turn away from the hip-hop culture in favor of a mission: to inspire the hearts and minds of youth and encourage them to choose healthy lifestyles. Marcus is partnering with the Native American Outreach Center on the Parents Speak Up National Campaign to help reach out to Indian Country and Alaska with this important message.

John Hammarlund is the Regional Administrator for the Chicago and Seattle offices of the Centers for Medicare & Medicaid Services (CMS). In this role, his primary focus is outreach and education about CMS programs to all Medicare, Medicaid, and SCHIP program stakeholders in ten states including Alaska, Idaho, Illinois, Indiana, Michigan, Minnesota, Ohio, Oregon, Washington, and Wisconsin. He is the national lead for rural health issues on behalf of all the regional offices, and helps to disseminate and explain CMS policy to rural providers and beneficiaries. John has been in the Seattle Regional office since 1999, and his background includes work in both the public and private sectors. A Seattle native, John holds a bachelor's degree from Stanford University; a master's in health administration from the University of Washington, and a law degree from Cornell Law School.

Paula L. Hammond, MLA began her career in the federal government with the Social Security Administration (SSA) in 1974 serving as a claims representative in the SSA District Office in Dallas, Texas. Paula has been working with Indian Country issues since 1985 when she became the Part A lead policy specialist in the Dallas regional office. Paula has been a speaker at previous National Indian Health Board Meetings as well as regional tribal consultation meetings. She has been the recipient of many awards in SSA, HCFA, CMS, and DHHS and has served on numerous national workshops. Initially, Paula obtained an Associate in Arts degree from Tyler Junior College and subsequently transferred to the University of Texas in Austin where she graduated Magna Cum Laude with a Bachelor of Arts degree. She also obtained a Master of Liberal Arts degree from Southern Methodist University in Dallas. She resides in Dallas and is very proud of her one son who just graduated with a BBA from the University of Texas in Dallas.

Janell Lane Hardy is the Area Agency on Aging, Region 8 Public Benefits Specialist for the Inter Tribal Council of Arizona, Inc. Mrs. Hardy coordinates the Public Benefits Outreach (PBO) Project which services 20 tribes in Arizona. The PBO Project educate, advocate, counsel and empower elders, caregivers, and people with disabilities to make informed healthcare and benefits decisions through outreach and education. In addition, the PBO Project also trains volunteers in tribal communities, to counsel local tribal elders. Mrs. Hardy holds a B.A. degree in Sociology from Dartmouth College and has prior experience with the Johns Hopkins Center for American Indian Health.

Todd Hartfield (ITCA DSC Consultant), a native of Baton Rouge, Louisiana graduated from Lorain Dental School in New Orleans in 1970. After two years as a U.S. Army dentist, including a tour of Vietnam, Dr. Hartfield's career has included private practice, public health dentistry and education. He spent 20 years in northern Canada training, supervising and working along side dental therapists in isolated northern communities. Dr. Hartfield is currently a clinical faculty member at the Arizona School of Dentistry and Oral Health teaching clinical dentistry to 2nd and 4th year dental students and a dental consultant for the Inter Tribal Council of Arizona.

Carole Anne Heart, Executive Director, Aberdeen Area Tribal Chairman's Health Board. Carole Anne Heart is an enrolled member of the Rosebud Sioux Tribe (Sicangu Lakota) (Yankton Sioux) (Hunkpawow Dakota) Nations. She has lived the majority of her life on or near Indian reservations in the Dakotas. In her present position as Executive Director of the Tribal Chairman’s Health Board, she administers programs to serve the health needs of tribal people residing in the states of North Dakota, South Dakota, Nebraska and Iowa. Her position requires keen analytical skills and creative thinking, as well as in-depth knowledge of tribal affairs, politics and law in order to balance the health needs of seventeen reservations and two urban health clinics, serving approximately 200,000 Indian people. Ms. Heart, is a past president of the National Indian Education Association, the largest Indian organization in the Country that advocates for education issues and has served as sponsors a widely attended national conference annually, presses for policy changes and monitors education issues for its constituents; She also serves as the Chair of the Direct Service Tribes Planning Committee; the organization representing the health needs of Direct Service Tribes, which is over half of the Tribes in the US. She was elected to the position of Co-Chair of the 2007 IHS Budget Formulation Workgroup. She was a political appointee, Senior Advisor to the Director of Indian Health Service (IHS), in Rockville, Maryland, the agency charged with administering the health needs of all Indian people and Tribes in the U.S. She presently resides in the Black Hills of South Dakota and recently parted with her daughter who is away at college.

Todd Hartfield, DDS, a native of Baton Rouge, Louisiana graduated from Lorain Dental School in New Orleans in 1970. After two years as a U.S. Army dentist, including a tour of Vietnam, Dr. Hartfield's career has

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included private practice, public health dentistry and education. He spent 20 years in northern Canada training, supervising and working along side dental therapists in isolated northern communities. Dr. Hartshfield is currently a clinical faculty member at the Arizona School of Dentistry and Oral Health teaching clinical dentistry to 3rd and 4th year dental students and a dental consultant for the Inter Tribal Council of Arizona.

Darrell Hillaire has been an elected member of the Lummi Nation Council for the past ten (10) years. Four (4) of those years he served as Chairman of the Lummi Nation. Darrell is an active member of the Lummi Community and is guiding the continuing development of a Recovery Community for members of the Lummi Nation through the CMAP Initiative. In 2006 he accepted an appointment to the Washington State Advisory Committee on Substance Abuse. His most recent CMAP project is the Lummi Nation Youth Academy. The Academy designed to provide a stable residential environment to support youth development, without breaking up families. He is proud to be a Coach for the Blackhawk, the Lummi Nation High School football team.

Marnie Hodakwen joined Governor Napolitano’s staff as the Policy Advisor for Tribal Affairs in August 2004 and serves as the Governor’s liaison with Arizona’s twenty-two tribal governments. Ms. Hodakwen is an attorney who practiced in the areas of commercial litigation and Indian law as an associate with the Phoenix law firm Quarels & Brady, Steech Lang before joining the Governor’s staff. Prior to law school, Ms. Hodakwen worked for the Salt River Pima Maricopa Indian Community in their Health and Human Services department. She also worked briefly for the Indian Health Service. During law school, Ms. Hodakwen served as an intern with the Gila River Indian Community law office. She is a graduate of the Indian Legal Program at the Sandra Day O’Connor College of Law at Arizona State University and also received her bachelor’s degree in general business administration from ASU. Ms. Hodakwen is a member of the Prairie Band Potawatomi Nation and the proud mother of a thirteen year old son, Jay.

Cinda Hughes is a descendent of the Cherokee Nation of Oklahoma and an enrolled member of the Kiowa Tribe of Oklahoma. She is currently employed full-time as a Legislative Associate for the National Congress of American Indians. Ms. Hughes held the title of Ms. Wheelchair America in 2004, which is a position of national public advocacy on behalf of people with disabilities. She is originally from Oklahoma, where she worked for ten years as a Research Assistant for the Oklahoma State Senate. While in Oklahoma, she volunteered her efforts for a number of organizations. Her positions included serving on the Advisory Board of Oklahoma’s Office of Handicapped Concerns as well as the Board of Directors for the American Civil Liberties Union of Oklahoma. She was a free-lance writer for several state and national print publications. She also produced and hosted a weekly Indian radio program in Oklahoma.

Brian Jackson is a Cherokee, Creek and Seminole Native American Motivational Speaker. From a life of Drugs and Alcohol to being a Guinness World Record Holder, you will be amazed at his life changing stories. Since 1992, Brian has traveled throughout the country presenting the “I Believe” program to schools, churches, youth groups as well as many different organizations, conferences and companies all over the country. Brian leaves audiences laughing and amazed with his different gifts and talents as well as his feats of strength.

Brenda Jeanotte-Smith is the Director of Contract Health at HHS Headquarters. Brenda is an enrolled member of the Turtle Mountain Band of Chippewa Indians located in Belcourt, North Dakota. She grew up on the reservation and attended both grade school and high school in Belcourt. She moved to California where she worked and studied nursing and received her LVN license in 1980. She worked at Long Beach Memorial Hospital and years later went to work at the Veterans Administration Memorial Hospital located in Long Beach, California. This is where she entered the federal service. In 1992, Brenda accepted a position at Headquarters in the CHS Branch as Assistant Fiscal Intermediary (FI) Project Officer. In 1996 she became the FI Project Officer and in 2006 she was selected as the Director for the Contract Health Services.

Warren Jimenez (Chumash Nation, Coastal Band) joined NNAAPC as Executive Director in July 2007. Prior to his work at NNAAPC, Warren served as Senior Policy Director for Portland City Commissioner Sam Adams. In that capacity, he was responsible for policy development, community and media relations, and community partnerships. Also, he served as the Commissioner’s official liaison to the Native American and Latino communities. He has worked with the Northwest tribes in the area of health care and community wellness and is the former Health Director for the Native American Rehabilitation Association. He served as the Southwest Washington Area Manager for Planned Parenthood of Columbia/Willamette and was the executive Director of the Tri-County Economic Development District in Coeville, WA. Additionally, Warren has extensive volunteer experience in serving Native youths, elders and families.

Robin John, RPh is the Lead Case Manager for the Yakama Indian Health Service Healthy Heart Program. As lead case manager, Robin is responsible for assisting and directing other case managers, writing policy and procedures, meeting grant requirements, and providing community activities and educational material. Robin is also the director for the “Dance Away Diabetes” program, a traditional Pow Wow exercise class. Prior to being employed by the Healthy Heart program, Robin was a clinical staff pharmacist for the Yakama Indian Health Service Pharmacy from 1995 to 2006. Robin also implemented and directed a pharmacy technician training program. Robin was also employed at Providence Hospital Toppenish and Payless Pharmacy Union Gap prior to joining the Indian Health Service team. Robin John graduated from the College of Pharmacy at Washington State University in 1992.

Sharon L. John, RN is an enrolled member of the Unamita Tribe (Walla Walla). LC DR John is the Project Coordinator and Supervisor for the Indian Health Service Healthy Heart Program. The Project Coordinator is responsible for the day to day operations of the Cardiovascular Risk Reduction grant project. As project coordinator, Sharon must ensure that all Healthy Heart Program activities are carried out in accordance with the grant guidelines, policies, and procedures of the Yakama IHS, ADA and IHS standards of care and evidence based research. LC DR John coordinated the conceptualization, design and logo idea, project activities and infrastructure systems for successful implementation, monitoring, evaluation and reports of all project activities. Sharon participates in the Diabetes Project multi disciplinary team to assess and ensure the program provides culturally relevant care for diabetics. This includes coordinating teaching tools, direct patient education, establishing treatment goals to be used by the case managers and participants, development of recruitment and retention strategies, and prepare, justify and administer the grant budget.

Rachel A. Joseph is a member of the Lone Pine Paiute Shoshone Tribe of California and serves as the Co-Chair of the National Tribal Steering Committee (NSC) for the Reauthorization of the Indian Health Care Improvement Act (IHCIA). She is a former Chairperson of the Lone Pine Paiute Shoshone Tribe and a current board member of the Toiyabe Indian Health Project, a consortium of nine Tribes, which serves Mono and Inyo Counties in central California. She has served for several years on the Indian Health Service (IHS) National Budget Formulation team representing California and has been elected to represent the IHS East Central California Tribes to the California Area Office Advisory Committee. Ms. Joseph is a graduate of Brigham Young University and performed graduate work at the University of Utah. She has worked as a Retired Legislative Advocate for the California Teacher’s Association, and has served as the former Executive Director of the National Congress of American Indians and the California State Director for the Clinton/Gore 1996 Election Campaign.

Levi Keebler is the Prevention Programs Manager and Methamphetamine Prevention Coordinator for Cherokee Nation Behavioral Health. Mr. Keebler earned his Masters Degree from Northeastern State University in Tahlequah, Oklahoma and is a Licensed Alcohol and Drug Counselor and an Internationally Certified Prevention Specialist. Mr. Keebler also holds a current Oklahoma Teacher’s certificate in Psychometry/Educational Diagnostics. Additionally, Mr. Keebler is an adjunct professor in the Counseling and Psychology Department at his alma mater. Mr. Keebler is an enrolled member of the Cherokee Nation and is committed to the restoration and preservation of the Cherokee way of life.

Jefferson Keel, the Lieutenant Governor of the Chickasaw Nation, is firmly committed to the service of Indian people. Lt. Governor Keel is keenly aware of the roles and responsibilities expected of tribal leaders and earnestly believes in the policy of “helping our people through honorable public service.” A proven and highly
respected tribal leader, he was recently elected to serve as the first Vice President of the National Congress of American Indians, the nation's oldest and largest tribal organization. Lt. Governor Keel is a retired U.S. Army officer with over 20 years of active duty service. He earned a bachelor's degree from East Central University in Ada, Oklahoma and completed his Master of Science degree at Troy University in Alabama. He has background experience in social services and all tribal health programs. Lt. Governor Keel and his wife, Carol, have three children and seven grandchildren.

**Brian King** is the Program Director of the Native American High School Summer Program at Harvard Medical School. His professional and academic work has explored cultural constructions of knowledge, situated learning, Native American school improvement, and education program design and evaluation. As an education researcher and student at the Harvard Graduate School of Education and research fellow at the Harvard University Native American Program, King facilitated school improvement initiatives involving technology, culture and learning on an Ojibway First Nation in Northwest Ontario (2000-2003). He has also held research positions at the TERC, Learning Center, and in Massachusetts area schools.

**Katherine Kirkland** is executive director of the Association of Occupational and Environmental Clinics (AOEC). AOEC is a clinical-based, international organization focused on occupational and environmental health through education, consultation, and outreach activities. She is a doctoral candidate at GWU SPHHS. She serves on both the World Trade Center Steering Committee, which provides guidance to programs involving responder health and the Patient Protection Committee, which provides oversight to all research involving the patient population.

**Ms. Melanie Fourkllr Knight** currently serves as Secretary of State for the Cherokee Nation. Ms. Knight represents tribes at a national level in various capacities to affect positive impact and change in tribal policy issues. She has served on the DHHS Negotiated Rulemaking Committee, DOI Tribal Self Governance Advisory Committee, IHS Tribal Self Governance Advisory Committee, individual inter tribal task groups on numerous IHA, IHS, and DOI issues, IHS Agency Lead Negotiators Manual Development, and various proposal review committees such as ANA, DOI, SG Education/Communication Project, HIS Self Governance Planning/Negotiation grants, and IHS Small Ambulatory Grant Program. Recently, she was nominated to serve as the Eastern Oklahoma Region Representative for the Indian Reservation Roads Program Coordinating Committee. Ms. Knight is an enrolled member of the Cherokee Nation. For the past 10 years she has been, and continues to be, an asset to the Cherokee Nation.

**Bill G. Lance, Jr.** is the Administrator of the Chickasaw Nation Health System. He has served in his current position since 2000. The Chickasaw Nation Health System is a complex, comprehensive health system including the Ada, OK campus consisting of Carl Albert Indian Health Facility and Clinics, the Diabetes Care Center, and a Family Practice Clinic. Additionally, four satellite family practice clinics are located in Ardmore, Tishomingo, Durant, and Purcell, OK. Mr. Lance also has substantial knowledge and involvement in the Indian Self-Determination Act and its regulations and policies. He currently serves on the Indian Health Service Information Systems Advisory Committee, technical advisor to Governor Bill Anoobibi on the Oklahoma Health Care Authority Board. He also participates in tribal funding agreement negotiations and is involved in both national and Oklahoma City Area tribal self-governance meetings. Mr. Lance received a Master of Public Health degree from the University of Oklahoma, College of Public Health. He also holds a Bachelor of Science degree in Nursing from East Central University.

**Victoria LaFromboise, MS** is the Tribal Prevention Specialist at the Suicide Prevention Resource Center (SPRC) which is funded by SAMSHA. Ms. LaFromboise's work is focused on providing assistance to tribes, tribal entities and those working with tribes and/or tribal entities on suicide prevention. She is Blackfeet from the Blackfeet Reservation in Montana. Her life, work, and education experiences up to now have inspired her to become a zealous and devoted American Indian advocate, even though she has lived off the reservation for most of her life. For the past twelve years, Ms. LaFromboise's educational and professional goals have been dedicated to diminishing health disparities among both urban and reservation-based American Indians.

**Charlene Le Fauve, Ph.D.**, is the Branch Chief for the Co-occurring and Homeless Activities at the Center for Substance Abuse Treatment, Division of State and Community Assistance, is a licensed clinical psychologist who provided clinical treatment of adult populations with substance use disorders and co-occurring mental health disorders for many years before joining the Federal workforce. She received her undergraduate degree from Howard University in Washington, D.C., where she was a National Institutes of Health Minority Access to Research Careers (MARC) Scholar and a member of the National Psychology Honor Society. Her graduate education was completed at the University of Georgia in clinical psychology with a specialization in behavioral medicine. Following a postdoctoral fellowship in Addiction Medicine at Virginia Commonwealth University's Medical College (MCV), Dr. Le Fauve joined the faculty in the medical college.

**Richard Litsey, Esq.** is Counsel and Senior Advisor for Indian Affairs for the United States Senate, Committee on Finance, handling issues bearing on Social Security, Indian Health Care, and Montana Tribal issues. He is an enrolled member of the Mesquage (Creek) Nation of Oklahoma and has been working on the Finance Committee for the past two and a half years. He has a Bachelor's of Arts Degree from Oklahoma State University, a Juris Doctor degree from the Thurgood Marshall School of Law, and a Master's of Law in International Economic Law from the University of Houston. He is a member of the Mississippi Bar Association, Texas Bar Association, the Capitol Hill Chapter of the Federal Bar Association, and the National Native American Bar Association.

**Marcus** (Quake Jake) Little Eagle (Pawnee and Seminole); born Marcus Fejo Little Eagle, is an award-winning Hip Hop Emcee; independent music producer, and cultural activist. Quake is a member of the Pawnee and Seminole Nations. With this heritage and culture Quake has since a very young age mixed his love for Hip Hop with his love for his people creating a sound called “Native Hip Hop.”

**Kris Locke** is a Health Policy Analyst with Locke and Associates in Sequim, Washington. She is a Tribal Technical Advisor for the CMS Tribal Technical Advisory Group. Kris is also currently serving as the Interim Director for the American Indian Health Commission for Washington State.

**Albert Long, M.A.,** obtained a Masters in Education with an emphasis in guidance and counseling from Northern Arizona University, and completed his undergraduate work at Eastern New Mexico University. He has worked for the Navajo Nation in the human services field for over 28 years, the last three years with the Navajo Department of Behavioral Health Services as a Senior Programs and Projects Specialist, focused on fiscal, personnel, and contracts management.

**Jay Macedo** (Yurok/Hupa) has eleven years experience working with Native communities to improve community health and wellness. Jay has used his skills to develop and organize HIV outreach services and prevention programs for communities of color and for gay, lesbian, bisexual, transgender, intersex, queer (GLBTIQ) and Two Spirit communities. He is a co-author on culturally-informed research practices and evaluation publications and has delivered numerous trainings, workshops and conference presentations. Jay holds a Master of Arts degree in sociology from Humboldt State University.

**Gale Marshall** (Oklahoma Choctaw) is the owner of Two Feathers Management, a national consulting firm that provides qualitative research, meeting facilitation, health communication and media services to a variety of federal organizations, marketing firms, universities and tribal organizations. She currently serves the National Diabetes Education Program (NDEP) as Vice Chair of the AIAN Workgroup.

**Sam McCracken**, former chair of Nike's volunteer Native American Network, heads the program he helped develop that interacts with and supports some 60 tribes across the U.S. It's one way that McCracken, and Nike, are touching the lives of thousands of tribal members in the communities where they live. McCracken, a Nike employee since 1997, is a member of the Ft. Peck tribes (Sioux and Assiniboinic tribes) of northeastern Montana. He began his Nike tenure at Nike's Wilsonville distribution center. McCracken's business plan covers three areas: the Nike Native American Incentive Program that helps tribes promote physical activity, the Office of Indian Education School Program, and the recently signed MOU with the Indian Health Service. McCracken was honored for his work in July 2004 with Nike's Bowmen Award, named for influential Nike co-founder and revered track and field coach Bill Bowmen. McCracken has also been cited for
his work by the Freedom Foundation at Valley Forge, who awarded him his George Washington Honor Medal for his entry in 2004’s Freedom Foundation National Awards program. He has most recently been honored with the 2007 President’s “Leadership Award” from the National Indian Gaming Association.

Edwin L. McLemore is a citizen of the Cherokee Nation. He began his career with the Indian Health Service (IHS) in 1989 in the Nashville Area Office. Mr. McLemore has served as the Chief Executive Officer (CEO) at the Hastings Indian Hospital, Tahlequah, OK, since May 2003, and has also served as the chairperson of the National Council of CEO’s, in 2005-2006. In addition to his responsibilities of advocating for the concerns and issues of the executive officers of the IHS, as the chairperson, he was a member of the IHS Director’s Executive Council (DEC). The DEC is a decision-making body on broad issues of policy and public health advocacy, and is composed of senior leaders from Headquarters, Area Offices, and the four IHS National Professional Councils.

Steve McLemore, MES, R.E.H.S. (Pima/Cherokee) has worked for the U.S. Public Health Service, Indian Health Service in the field of Environmental Health since 1983. He presently is the District Environmental Health Officer for the Indian Health Service, Albuquerque Area, Southern District which serves the reservations from Jemez to Ysleta del Sur (El Paso, TX) and from To'Hajiilee Navajo to Zuni Pueblo. For about ten years Steve taught Native American Studies at the university level (University of California at Berkeley, Stanford, and other colleges and universities) in California and Oklahoma.

Lucinda Meyers is a 2002 graduate of the University of Oklahoma where she obtained her Master of Social Work degree with an emphasis in administration and community planning. She was previously employed with St. Louis County Government where she was involved in a $1.5 million dollar demonstration project focused on community reintegration strategies for youth offenders. During her employment with St. Louis County Government, she served as a conflict resolution mediator to over 4,000 county employees. Lucinda has work experience in case management, conference coordination, as well as designing curriculum for youth development training. In addition, she received a certificate in public speaking and leadership development and was recognized by the State of Oklahoma House of Representatives and Senate for her volunteer work in the community in 2002.

Nathaniel Mills is a fifth year doctoral student in the Department of Counseling Psychology at Lehigh University. Nathaniel is a member of the Chocowet Tribe of Oklahoma and is completing a doctoral dissertation examining the relationship of acculturation and age to Native American people’s attitudes about mental health services.

Kelly Moore, a member of the Muscogee (Creek) Nation of Oklahoma, is the first American Indian Chair of the Committee on Native American Child Health of the American Academy of Pediatrics. She recently retired from the Indian Health Service with 15 years of experience in American Indian communities in Montana, Utah, Arizona, and Washington and 3 years with the Indian Health Service Division of Diabetes. She celebrated her 25th wedding anniversary with her husband Jon Wilson in 2005. They have two children: Matthew, age 25, and Tara, age 18.

Manual Morgan has been active with local, regional and national tribal, IHS and CHC organizations as well as a number of other Boards and organizations.

Christopher Morris, Ph.D., is Clinical Director of the Navajo Department of Behavioral Health Services Shiprock Treatment Center. Dr. Morris is a licensed clinical psychologist, who earned his doctorate at Utah State University. He has worked in a variety of settings operated by IHS as well as tribal and non-profit programs operated under P.L. 93-638. Besides his extensive experience in Native American behavioral health, he has a special interest in early childhood mental health and has worked as both a researcher and a clinician with early intervention and Head Start programs in New Mexico and Utah.

Carolyn Thomas Morris, Ph.D., is of the Red Streak Clan and born for Tangle People, and was born and raised near Red Valley, Arizona, on the Navajo Nation. She is a licensed Clinical Psychologist with the Navajo Department of Behavioral Health Services, and Dr. Morris is one of the few practicing psychologists who is fluent in the Navajo language. She earned her doctorate at Utah State University and did her undergraduate work at Fort Lewis College in Durango, Colorado. She has worked as director of an adolescent residential treatment center for the Navajo Nation, also as a consultant and therapist in numerous settings, a research project coordinator, a special education director, and a school psychologist. She is particularly interested in delivery of culturally responsive behavioral health services to underserved Native American populations.

Cindy Murphy has been employed by CMS for over 28 years, the last 7 in the Center for Medicare Management. Previously she worked in CMS’ Office of Information Services in what is now the Business Applications Management Group, where she worked on HHS and CMS systems issues. During her Federal career she has worked in Medicare and Medicaid systems areas, and has been detailed to the Federal Emergency Management Agency and the Public Health Service to provide claims processing guidance. Beginning with the planning for the first prospective payment system in 1982, her focus has been Medicare Fiscal Intermediary claims processing and provider billing instructions. She has a BA in Psychology from the State University College at Brockport, NY, and an MS in Psychology from the State University of New York at Buffalo, NY.

Virginia Myers is the Program Coordinator for the California Tribal Epidemiology Center. Virginia is a member of the Yurok Tribe and also of Karuk descent. Virginia was previously employed with the Yurok Tribe as their Collections and Repatriation Management Assistant. She holds a Bachelor of Arts in American Indian Studies and Sociology from the University of California, Los Angeles.

Lori New Breast is Amskapiipiwin (Blackfeet) and resides on the Blackfeet Reservation in Montana. She has over 18 years of experience providing culturally based prevention, wellness and advocacy services to American Indian, Alaskan Native, and First Nations communities. Lori initiated the Blackfeet Tobacco Free Act 2005 of the Blackfeet Nation, the first enforceable tobacco tribal law passed by an American Indian tribe. Lori currently is a member of the Native American Tobacco Coalition of Montana, and participates in the World Health Organization Indigenous Peoples Forum on tobacco use development. She is committed to restoring and promoting optimum cultural health.

Leo J. Nolan III, M.Ed., serves as Senior Policy Analyst in the External Affairs for the Office of the Director, Indian Health Service, Department of Health and Human Services and has been with IHS in various capacities since 1986. Mr. Nolan began his federal government career with the Indian Education Program in HEW and then the Department of Education, and has also worked at the BIA’s Indian Education Program, the Senate Committee on Indian Affairs and in the State University of New York system. Mr. Nolan is from the Onondaga Nation and is an enrolled member of the Akeessene Mohawk Nation.

Dennis K. Norman, Ed.D, ABPP is the Chief of Psychology and the MGH Faculty Chair for the Harvard University Native American Program. Dr. Norman is Board Certified in Clinical and Child Adolescent Psychology. He received his doctorate in Human Development, Counseling and Consulting Psychology from Harvard University. Dr. Norman has been the Chief of Psychology at Massachusetts General Hospital since 1989. Dr. Norman’s research interests include: personality structure and functioning, psychosocial adjustment to chronic illness and trauma, and intellectual and neuropsychological correlates of ADHD. He is the faculty chair for the Harvard University Native American program. This work has enabled him to fulfill a long term interest in healing and the difficult role of providing meaningful psychological consultation in differing cultural contexts.

Phil Norgard, MSW, has been the Director of Human Services for the Fond du Lac Band of Lake Superior Chippewa for 28 years. Known for innovative programming, Fond du Lac has received numerous awards including two from Honoring Nations. He currently serves as the Board’s Alternate on the TTA.

Catherine D. Nugent has over 25 years of professional experience as a psychotherapist, educator, consultant, and program administrator. Currently, Ms. Nugent is Acting Team Leader for Workforce Development in the Substance Abuse and Mental Health Services Administration’s Center for Substance Abuse Treatment (SAMHSA/CSAT). In this capacity, she coordinates Federal initiatives focused on expanding and strengthening the workforce that provides services to approximately 3.9 million Americans age 12 and older receiving treatment for alcohol or illicit drug problems. Ms. Nugent also serves as Project Officer for CSAT’s
Richard W. Puddy, Ph.D., MPH joined the Division of Violence Prevention with Centers for Disease Control and Prevention in March 2007. He serves as a Behavioral Scientist for a range of projects in the areas of suicide, child maltreatment, and youth violence prevention. He earned a Ph.D. in Clinical Child Psychology and a MPH from the University of Kansas, completed a two-year postdoctoral fellowship at the Pennsylvania State University, and served as a faculty member at the University of South Florida. Richard has 15 years experience working in the field of child’s mental health, child welfare, and prevention.

Rex M. Quaempts, MD is an enrolled member of the Yakama Nation and is the Director of the Healthy Heart Program (HHP) at the Yakama Indian Health Service Unit in Toppenish, Washington. He was instrumental in submitting and obtaining the Special Diabetes Program for Indians Competitive Grant in 2004 (Cardiovascular Disease Risk Reduction Project). In addition to his medical career, Dr. Quaempts promotes a healthy lifestyle by example as a triathlete and marathon runner, including the Iron man competition in Courr D’ Alene, Idaho in 2005 and 2006. He was born and raised in Pendleton, Oregon, on the Confederated Umatilla Indian Reservation. He received his undergraduate degree at Oregon State University, a Masters in Botany from the University of Arizona, and Doctorate degree from the University of Washington and completed his residency in Family Practice.

Gary M. Quinn, M.S.W. Mr. Quinn’s federal work experience includes three years with the Indian Health Service Division of Behavioral Health. Gary is 2006 graduate of the Department of Health and Human Services Emerging Leaders 2 year internship. During Gary’s Emerging Leaders Program, he worked rotations at the Substance and Mental Health Services Administration Office of Policy, Planning and Budget (OPPB), the Administration on Aging, Office of American Indians, Alaska Native, Native Hawaiian Programs, (OAIANHP) and the National Institute of Mental Health Services, Division of Services Intervention Research (DSIR). Prior to federal service, Gary worked with adolescents held in county, state and Tribal detention facilities, served as an ombudsman with the Pima Council on Aging, and taught transition skills to adult women awaiting release from Arizona Department of Corrections. Gary also was a Native American Recruiter and academic advisor at Pima Community College in Tucson, Arizona.

WJ ‘Buck’ Richardson Jr., CHEM was selected by the VISN Director for VISN 19 to be the Minority Veterans Coordinator in April of 2005. In this role, he performs outreach to all veterans of the VISN, most especially to the minority veterans of the VISN. Prior to working in the VISN office with the Minority Program, he was the Supervisory EMS Specialist for the VA Montana healthcare system. Richardson is a veteran of the U.S. Marine Corp, and was raised in a military family. He grew up at numerous Air Force bases across the U.S. and Japan, as his father is a retired Air Force officer. He also has a brother who is a veteran, and is very proud that his oldest son is a veteran of the USMC with multiple tours in the OEF/OIF theatre. Richardson is a member of a number of Warrior Societies in the areas of VISN 19, as well as a number of national service organizations. He is a graduate of Capital City Junior College, Montana State University, and the Certified Healthcare & Environmental Manager’s course for healthcare professionals.

John Riley (Miami Tribe of Oklahoma) Student “Move It” Representative Davenport Schools, Davenport, Oklahoma.

Nancy Rios received a Bachelor of Science Degree in Biology from Central University of Puerto Rico. In August 1999, Nancy started working as a Health Insurance Specialist for the Health Care Financing Administration – now the Centers for Medicare & Medicaid Services (CMS). She worked for the Division of Medicaid and State Operations, Survey and Certification Branch where she served as the Organ Procurement Organizations Coordinator’s backup. Also, she gained knowledge and experience in provider certification and termination processes, Medicare provider regulations, compliance reviews and policy development. In 2002, she was transferred to the Division of Medicaid and Children’s Health where she became the Native American Contact dealing with policy and program issues that affect Indian Health. During this time she conducted Home and Community-Based Services (HCBS) Waiver reviews to evaluate the overall performance and quality of States’ HCBS programs. Currently, Nancy works for the Regional External Affairs Office.

James C. Roberts is a Hope/Sioux tribal member that is enrolled with the Hope Tribe at Shungupwapi, Arizona. He has worked in American Indian governmental and health issues for over twenty years. Currently, Mr. Roberts serves as the Policy Analyst for the Northwest Portland Area Indian Health Board (NPAIHB). Jim works to advise federal and state governments from the perspectives of the tribal governments and Indian health care consumers. Mr. Roberts provides technical expertise to Tribal leaders on a number of health policy and governmental matters. He was instrumental in working with Tribal leaders to revise the HHS and IHS Tribal Consultation policies. He served as a technical expert in writing both the CDR and CMS Tribal Consultation policies. He has served to support the IHS Budget Formulation Work Team since its inception in 1997. Jim worked with Northwest Tribal leaders to establish the CMS Tribal Technical Group by serving on the interim TTAG and now serves as a current member. Prior to joining the NPAIHB he worked for the National Indian Health Board and with American Indian Technical Services. He completed his education at Metropolitan State College of Denver with degrees in Economics and Business Management.

Yvette Roubideaux (Rosebud Sioux Tribe) MD MPH is an Assistant Professor at The University of Arizona and her work focuses on research and education about diabetes in American Indians and Indian health policy. She is Co-Director of the Coordinating Center for the Special Diabetes Program for Indians Demonstration Project, which is a congressionally funded diabetes and cardiovascular disease prevention initiative in 66 Indian health sites. She is Chair of the Awakening the Spirit.
Team of the American Diabetes Association. She formerly worked as a medical officer/clinical director in the Indian Health Service, and is a past President of the Association of American Indian Physicians.

Ivette Ruiz has been a Program Officer for the Drug Free Support Program at the Center of Substance Abuse Prevention since 2004. She is a City Planner by training and prior to coming to CSAP, she developed prevention programs targeting high risk youth in Puerto Rico from 1998 to 2004.

Stephanie St Pierre teaches at George Washington University’s School of Public Health and Health Services (GW-SPHS) on public health issues affecting Native Americans. As President of The St. Pierre Group she has worked on a variety of public health projects, specializing in Urban Indian Health. Ms. St. Pierre worked as Health Educator at the American Indian Community House in New York City and was also a member of the Indian Health Service Working Group on Health Literacy. She was involved in the 9/11 recovery effort in New York City as Director of Safe Horizon’s Community Trauma Responder Training Academy.

Vicki Sanderford-O’Connor, M.A., at the California Rural Indian Health Board’s Social Wellness Program Manager works with tribal government programs, individuals, groups, communities and agencies to better coordinate and facilitate social wellness programs for Indian people. Administrators and directs a $17.1 million three year Access to Recovery grant for a statewide, multiple site program designed to enable the provision of health care in the form of substance abuse treatment and recovery support services to American Indians and Alaskan Natives residing in California. Previously, Vicki was employed with the California Department of Corrections and Rehabilitation for 16 years, she managed the Preventing Parole Failure Program where she was responsible for the oversight of a $14 million dollar budget and statewide, multiple site transitional programs focused on reducing recidivism and saving tax dollars. Vicki is a published author, facilitator, and consultant, with extensive experience in all phases of Program Management.

Paulene Shebala (Navajo/Zuni), is from To’Hajilee, New Mexico. She’s a graduate of West Mesa High School and Central New Mexico Community College in Albuquerque, NM. During the past five years she has been a strong advocate in trying to eliminate the high prevalence of diabetes in Native American communities. Her work began in 2000 by hosting free basketball camps for her local youth. In 2005 her efforts continued during her reign as Miss Indian New Mexico. Today, Paulene serves as a health planner for the To’Hajilee Community Action Team, a health council that works towards diabetes and substance abuse prevention.

Kerri Smith Slingerland, MSW is currently the Project Director for the Native American Rehabilitation Association of the Northwest (NARA), Family Circle Project. The Family Circle Project is a collaborative project between the Department of County Human Services, Multnomah County and NARA. The purpose of the project is to provide relapse prevention and recovery support services to Native American men, women, and their families.

Kenneth Smoker Jr., serves as a Health programs specialist at the Fort Peck Tribes/Indian Health Service. He has 18 years of government service and 9 years as an elected official of the Fort Peck Tribal Council. The HPDP program promotes healthier lifestyles through partnerships between multiple agencies, schools, students, elders, and community members to motivate change and improve community conditions. He is currently working with Higher Educational Institutions such as Harvard Medical School, U of M, MSU and UW in the areas of substance abuse, domestic violence, mental and behavioral health, cancer, heart disease, exercise, nutrition, smoking, asthma prevention, dental and tele-health.

Leslie Storm, MA, LPC has a master’s degree in Psychology. Her work experience has largely been in private practice. Her clinical work has focused on substance abuse, domestic violence, mental health crisis work, and crisis line work which deals specifically with suicide intervention as well as issues pertaining to substance abuse.

Phillip Talamous (Creek/Seminole) is currently the Third Party Billing Supervisor for Muskogee (Creek) Nation Health System; he also serves as a Part of Sale trainer within Oklahoma Area Office and Muskogee (Creek) Nation Health System. His previous experience includes pharmacy technician at WW. Hastings in Tahlequah, Oklahoma and Business Office Pharmacy Biller at Lawton Indian Hospital in Lawton, Oklahoma. Mr. Talamous’s expertise in pharmacy billing accounts for a 62% increase, average of $40,000 more a month while at Lawton. He has increased overall collections for Muskogee (Creek) Nation Health System by 16% in the short 3 months of employment bringing Okmulgee Indian Health System to the second highest paid per prescriptions in Oklahoma Area.

Teresa Wall BSN, MPH is the President and Founder of Native American Public Health in Phoenix, AZ. Ms. Wall has more than twenty-five years of experience working in Native American health with thirteen years spent administering a tribal health department. She has served on various local, state and national boards, commissions and committees such as the Arizona Rural Health Association, the Governor’s Commission on Women’s Health and the Native American Community Health Center, Inc., Phoenix, AZ. Ms. Wall also became the first Native American woman to be elected to the National Association of County and City Health Officials (NACCHO) Board of Directors.

Dr. Donald Warne, MD, MPH. serves as President and Chief Executive Officer of American Indian Health Management & Policy. He received his medical degree from Stanford University and a Master of Public Health from Harvard University. He is also a Diplomate of both the American Board of Family Practice and the American Board of Medical Acupuncture. Since 1998, Dr. Warne has worked as a family physician in the American Indian community. As a Staff Clinician with the National Institutes of Health in Phoenix from 2000 to 2003, he conducted diabetes research and developed diabetes education and prevention programs for Native American tribes. Dr. Warne is currently on the faculty of the Arizona State University College of Law, where he teaches classes on American Indian Health Law and Policy. He also works with the Indian Legal Program, and is the chair of the Traditional Cultural Advocacy Committee at the Phoenix Indian Medical Center.

Victoria Warren-Mears, Ph.D., RD. is the Director of the East Center at the Northwest Portland Area Indian Health Board. Victoria holds a doctorate in Nutritional Sciences from the University of Washington and has worked in Public Health and Research for over 14 years in the Pacific Northwest. Her primary interests are using appropriate interventions to prevent and treat disease such as obesity, with a special emphasis on food systems and policy. Her hobbies include horseback riding, jewelry making and paper crafts. She is the proud mother of a 6 year old son and has been married for 9 years.

Beverly Watts-Davis was appointed as the Senior Advisor on Substance Abuse to the Administrator of the Substance Abuse and Mental Health Services Administration after serving over three years as the Director for the Center for Substance Abuse Prevention (CSAP). As CSAP Director, Ms. Davis worked in partnership with Federal agencies, State and local government, and public and private sector organizations to prevent illegal drug use and the abuse of legal drugs by building resilience among young people, facilitating recovery, and promoting protective factors and reducing risk factors in communities nationwide. Prior to her appointment at SAMHSA/CSAP, Ms. Davis was the Executive Director of San Antonio Fighting Back and the Senior Vice President with the United Way of San Antonio and Bexar County. She was selected by the U.S. Department of Defense to Joint Civilian Orientation Conference and later became the first African American woman to be selected to the Defense Orientation Conference Association. Under her leadership, San Antonio Fighting Back, a Community Partnership to prevent substance abuse and its related community harm, was selected as an Exemplary Program by SAMHSA/CSAP, a National IMPACT 7 Award recipient for overall community improvement, and an Exemplary Program by the Governor’s Office of Criminal Justice.

Michael D. Weahkee, MBA, MHSA is the Family and Community Health Services (FCHS) Department Director at the California Rural Indian Health Board, and has served in that capacity since May of 2001. Michael is originally from Fannington, New Mexico, and is a member of the Zuni Pueblo Indian Tribe. As the Director of the FCHS Department at CRHIB, he administers approximately $9.2 million dollars annually for the purposes of providing culturally appropriate public health services for the American Indian and Alaska Native people of California. Michael obtained his Bachelor of Science degree from Southern Illinois University, in Carbondale, Illinois, and specialized in Health Care Management. He then furthered his education by obtaining both a Master of Business Administration and a Master of Health
Charlene Whelan, LCSW, MBA is currently Health Educator for the American Coalition of America and collaborates on behalf of its National Peer Network. In addition to over 30 years of experience as a psychotherapist, Ms. Whelan has an extensive background serving in a number of volunteer and staff capacities for other nonprofit health agencies and organizations working for social justice and change, including promoting popular education. Her presentations and facilitations have been conducted at local, regional and national events for numerous organizations.

Felicia Wilkins-Turner, EdD is a member of the Lumbee Tribal Nation of NC. She is an experienced researcher who designed and implemented two major state-wide research projects for the NC Governor Commission, Office of Minority Health and Human Relations Commission. She served on the editing team for the Symposium and Indian Health Research Manuscript for US Dept. of Ed. and for the Indian Health Service Briefing Book manuscript for the National Evaluation Managing Office. Presently she is the Principal Investigator on the NIDRR VR Research Project.

Megan Wohr is a commissioned officer in the U.S. Public Health Service. LCDR Wohr practices clinical pharmacy at the Phoenix Indian Medical Center (PIMC) in Phoenix, Arizona. She developed and implemented a pharmacy based tobacco cessation clinic and has coordinated its activities for six years. In 2005, LCDR Wohr was appointed by the Director of the Indian Health Service to the IHS Tobacco Control Task Force and is the lead for the development and dissemination of the Task Force Fieldbook, "Implementing Tobacco Control Into the Primary Healthcare Setting." Recently, LCDR Wohr accepted the role of Tobacco Control Specialist under the IHS Division of Epidemiology and the PIMC Oncology Center of Excellence.

Bryan Wooden is the Deputy Director of the Division of Behavioral Health at the Indian Health Service. He is a graduate of the University of Michigan, School of Social Work, with specialized training in mental health/substance abuse disorders. Mr. Wooden is a licensed clinical social worker with 17 years experience serving as an Officer, United States Air Force, Project Director for United States Army’s Victim Advocacy Program, Program Manager for Community Health Awareness Group and through his own organization, Metro Community Services, Inc. He has provided social work counseling, training, staff development, consulting for Prince George’s County Foundation for Children/Families and Damien Ministries. Mr. Wooden has achieved the accreditation of Diplomate in Clinical Social Work, the highest accreditation for a clinical social worker.

Alyssa York, DDS, is a graduate of University of Michigan School of Dentistry, where she received the Public Health Dentistry Award. She has been a licensed and practicing Dentist for 10 years. She previously practiced dentistry in Georgia 6 years before relocating to Phoenix, Arizona. Dr. Alyssa York has a variety of dental experiences from treating our nation’s finest at Luke Air Force Base, to treating the urban underserved children and adults in Atlanta, Georgia. Dr. York has experience treating adults with severe developmental disabilities - the Special Needs population at Granger Dental Center in Phoenix, Arizona. She is currently, the Inter Tribal Council of Arizona, Inc. Dental Prevention and Clinical Support Center’s Dental Director. Dr. York plans to make a positive impact in the American Indian Communities through her dedication to oral health education and disease prevention.

Inge K. Zamora has 33 years of experience in the health care industry and has been dedicated to the IHS/CHS Fiscal Intermediary contract since its inception in 1986. Her years of experience with the program have made her a resource for both IHS/CHS and BCBSNM staff. Ms. Zamora is currently responsible for provider file and provider contract data, and accurate reimbursement of claims. She oversees the annual Medicare pricing data load projects. Her areas handle complex claim pricing issues. Ms. Zamora works directly with the Area Contracting offices making recommendations for appropriate medical or dental contract pricing language, and assisting the Officers and Headquarters staff in understanding Medicare reimbursement methods.

Marilyn Zimmerman, MSW, is an enrolled member of the Assiniboine Sioux tribes of the Fort Peck reservation in Montana. Ms. Zimmerman is the Co-Director of the Montana Center for Childhood Trauma at The University of Montana. Her areas of experience in are: culturally-relevant, evidence based interventions to treat childhood traumatic stress amongst AI/AN populations and suicide prevention strategies in tribal communities. She is currently the Native American Liaison, for the National Suicide Prevention Lifeline. She has extensive experience working with tribal health and juvenile justice agencies on reservations.

The late Sage Walters, shown here at the 2006 Annual Consumer Conference, with daughter. NIHB honors her memory and family.
The Board of Trustees of the Confederated Tribes of the Umatilla Indian Reservation chartered the Tribal Health Commission in order to oversee and ensure that quality health care is provided to tribal members and other persons eligible to receive services from Yellowhawk Tribal Health Center. The Health Commission is appointed by the Board of Trustees and governs Yellowhawk.

Yellowhawk promotes the wellness of Tribal members and other eligible patients through Direct Care Services, coordination of outside medical services ("Contract Health Services"), health promotion, disease prevention, and community education and training. Both Direct Care Services and Contract Health Services have eligibility criteria in order to satisfy Indian Health Services regulations and to ensure the availability of financial resources.

PHYSICAL ADDRESS:
73265 Confederated Way
(6 miles East of Pendleton along Mission Hwy)

MAILING ADDRESS:
PO Box 160 Pendleton, OR 97801

PHONE: 541-966-9830
FAX: 541-278-7579
WEBSITE:
http://www.yellowhawk.org
**AMERICAN INDIAN AND ALASKA NATIVE ARTISANS AND CRAFTSMEN**

**House of Ravens:** Tatiana Doubrovina  
Port Hardy, British Columbia

**Indian Arts & Crafts:** Jennifer Espinosa  
La Verkin, Utah

**Lillian Jackson Arts & Crafts:** Lillian Jackson  
Sacramento, California

**Navajo Jewelry & Crafts:** Bernice Yazzie  
Albuquerque, New Mexico

**Rain Bear Jewelry:** Marjorie Bilagody  
Tuba City, Arizona

**Rosemary Williams Arts & Crafts:** Rosemary Williams  
Flagstaff, Arizona

**FEDERAL GOVERNMENT AGENCIES**

United States Department of Health and Human Services  
Office of Minority Health Resource Center  
Rockville, Maryland

United States Social Security Administration  
Baltimore, Maryland

Private Corporations and Foundations

Amylin Pharmaceuticals  
San Clemente, California

ASCG Incorporated  
Albuquerque, New Mexico

Flintco Incorporated  
Albuquerque, New Mexico

Kaufman & Associates Incorporated  
Parents Speak Up Campaign  
Spokane, Washington

ScriptPro  
Mission, Kansas

Virchow, Krause & Company  
United States of America

**ORGANIZATIONS**

American Diabetes Association  
Awakening the Spirit: Pathways to Diabetes Prevention and Control  
Alexandria, Virginia

Amputee Coalition of America  
Knoxville, Tennessee

Association of American Indian Physicians/National Indian Women’s Health Resource Center  
Oklahoma City, Oklahoma

Central Oklahoma American Indian Health Council Incorporated  
Oklahoma City Indian Clinic  
Oklahoma City, Oklahoma

Mayo Clinic  
SPIRIT OF EAGLES  
American Indian/Alaska Native Leadership Initiative on Cancer  
Rochester, Minnesota

National Council on Urban Indian Health  
Washington, District of Columbia

National Indian Child Welfare Association  
Portland, Oregon

National Native American AIDS Prevention Center  
Denver, Colorado

Sacred Circle National Resource Center to End Violence Against Native Women  
Rapid City, South Dakota

Yakama Indian Health Center  
Yakama Healthy Heart  
Toppenish, Washington

Klamath Alcohol and Drug Abuse Wemble Naalam T’at’aksni (Heal Our Children)  
Wemble House Treatment Center  
Klamath Falls, Oregon

**UNIVERSITIES**

Des Moines University  
Des Moines, Iowa

University of North Dakota  
Indians Into Medicine Program  
Grand Forks, North Dakota

Oregon Health and Science University  
Center for Healthy Communities  
Portland, Oregon
DoubleTree Hotel & Executive Meeting Center  
Portland-Lloyd Center  
1000 NE Multnomah  
Portland, Oregon, USA 97232  
Phone: 503-281-6111  
Fax: 503-284-8553

Business Center
Location: There is one business center located just to the right of the front desk in the main lobby near the entrance. The business center is open 24 hours. Front desk personnel can assist you with copy and fax requests.

The Guest Fax Number to receive faxes is: 503-284-8553.

ATM
The ATM machine is located just to the right of the front desk in the main lobby.

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Items found on hotel property or in guest rooms are turned into the hotel. Inquiries on lost and found items may be made to the housekeeping department 24 hours a day.

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and ask to be connected to the concierge desk

The Double Tree concierge staff can assist with almost all guest needs from ground transportation and dinner reservations to local attractions and shopping. The concierge desk is located in the main lobby next to the elevators near the main hotel entrance. If you need assistance late in the evening, please contact the front desk personnel.

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And ask for assistance

If you have need of security, police or emergency medical services please dial zero '0' on a Doubletree house or room phone or go to the front desk and ask for help. All emergency and security services are coordinated through the front desk personnel. The front desk is located on the ground floor in the main lobby area next to the main hotel entrance.
CONFERENCE INFORMATION

Agenda Changes:
Changes to the conference agenda will be posted daily by the registration desk located on the first floor just outside of the Lloyd Center Ballroom.

Conference Badges:
Official National Indian Health Board 24th Annual Consumer Conference name badges will be issued to each participant upon registration. Please be sure to wear your conference name badge at all times as it is your passport to enter all conference activities, plenary sessions, workshops and scheduled events*. Replacement badges can be requested at the registration desk located on the first floor just outside of the Lloyd Center Ballroom.

*Special name badges issued to all exhibitors grant access to the exhibit area, opening reception, Pendleton Woolen Mills VIP shopping event and the NIHB 35th Anniversary and Culture Night events only.

Registration Desk:
The registration desk will be open throughout the conference to meet your conference and informational needs. The registration desk is located on the first floor just outside of the Lloyd Center Ballroom.
The registration desk hours are:

- Monday, September 24, 2007: 1:00 pm to 5:00 pm
- Tuesday, September 25, 2007: 7:00 am to 5:00 pm
- Wednesday, September 26, 2007: 7:00 am to 5:00 pm
- Thursday, September 27, 2007: 7:00 am to 5:00 pm
- Friday, September 28, 2007: 7:00 am to 2:00 pm

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 Annual Consumer Conference maintains a policy of being Drug and Alcohol Free during all conference related events, meetings, plenary sessions and workshops. The Board of Directors of the National Indian Health Board and staff respectfully request that all participants, exhibitors, 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.

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FACILITIES

- Oregon Convention Center
- Memorial Coliseum
- Rose Garden arena
- PGE Park
- Portland Center for the Performing Arts
- Keller Auditorium
- Portland Metropolitan Exposition Center

TRANSIT

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Light Rail stop
- Portland
- Streetcar

Fareless Square

The light yellow area indicates Fareless Square, a 330-block area in which all rides on TriMet buses, MAX light rail trains and streetcars are
I

HOTELS
Downtown and Lloyd Center

1. Residence Inn by Marriott – Lloyd Center
2. Doubletree Hotel Portland – Lloyd Center
3. Inn at the Convention Center
4. Red Lion Hotel Portland – Convention Center
5. La Quinta Inn – Convention Center
6. Courtyard by Marriott Lloyd Center
7. Holiday Inn – Portland/Downtown
8. Ramada Inn Rose Quarter
9. Embassy Suites – Downtown
10. Four Points by Sheraton Portland Downtown
11. 5th Avenue Suites Hotel
12. Hotel Lucia
13. The Benson Hotel
14. Hotel Vintage Plaza
15. Portland Marriott City Center on Broadway
16. The Westin Portland
17. The Governor Hotel
18. The Mallory Hotel
19. The Paramount Hotel
20. The Heathman Hotel
21. Hilton Portland & Executive Tower
22. Days Inn City Center
23. Marriott Downtown on the Waterfront
24. RiverPlace Hotel
25. Doubletree Portland – Downtown
26. Marriott Residence Inn – Portland Downtown at RiverPlace

ATTRACTIONS
Portland Oregon Information Center, located in Pioneer Courthouse Square
1. Portland Classical Chinese Garden
2. Japanese American Historical Plaza
3. Portland Saturday Market
4. Oregon Maritime Center & Museum
5. Powell's City of Books
6. Mill Ends Park
7. Oregon Sports Hall of Fame
8. Portland Spirit
9. Oregon Historical Society
10. Portland Art Museum
11. RiverPlace Marina
12. Oregon Museum of Science & Industry (OMSI)
13. Willamette Jetboat Excursions

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Future NIHB Consumer Conference Dates

September 22-26, 2008
California

September 21-25, 2009
Nashville Area

September 20-24, 2010

See You There!

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