INDIAN HEALTH CARE
IN THE ERA OF HEALTH CARE REFORM

National Indian Health Board
26TH ANNUAL
Consumer Conference

September 14-17, 2009
Hyatt Regency on Capitol Hill
Washington, D.C.
THE CENTERS FOR MEDICARE & MEDICAID SERVICES

is proud to sponsor

CMS DAY
September 16, 2009

Improving Access to Medicare, Medicaid & CHIP Services for American Indians & Alaska Natives: Real Programs for All Generations.

1. Find out about major changes from key leaders.
2. Get answers to your questions at breakout sessions.
3. Check out the Outreach and Education Materials at the CMS Booth.

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Step back in time and one would see an America thriving with Native communities that honored life. One could see communities embracing traditions of healthy living - eating native foods, engaging in physical activity and living with holistic values that promoted balance and health.

Today society is searching for answers about healthcare.

This year NIHB's Annual Consumer Conference is in the capital of the United States. Let our voices unite to interact with the leaders of this Nation in talking about the challenges Native people face and share the solutions that have been effective. Our Native values, customs, and beliefs have always focused on living a healthy life! Continue this tradition. Please join us. Share your knowledge, come, learn, and be a voice for your community.

This is our time- time for Indian Healthcare in the Era of Healthcare Reform!
National Indian Health Board

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September 14, 2009

Welcome Friends, Colleagues and Supporters!

On behalf of the National Indian Health Board I welcome each of you to our Annual Consumer Conference, held this year in our Nation’s Capitol, Washington, D.C. We are pleased to be able to hold our conference in Washington, D.C. this year, especially given the current National Agenda of Health Care Reform.

It is timely that our theme, Indian Health in the Era of Health Care Reform focuses on many areas of relevance to our people; legislative activity, the impact of health care reform in Indian Country, contract health services, model program focuses and public health just to highlight a few. We have devoted an entire day to Centers for Medicaid and Medicare Services, including a session dedicated to recent legislative gains through the American Recovery and Reinvestment Act, and the Children's Health Insurance Program Reauthorization Act. We are especially honored to have Kathleen Sebelius, Secretary of the United States Department of Health and Human Services provide the keynote address; American Indian and Alaska Native Health Care in the Era of Reform at our opening plenary session.

As each of you joins together in the sessions and discussions, I would ask that we take a moment to reflect and honor the sacred traditions of all Native People, and recognize the importance of what we do here today for future generations. Our era of reform is just beginning to unfold through the leadership demonstrated by our Nations in responsiveness to our people in the provision of health care they need and deserve. The elevation of the health status of American Indians and Alaska Native people will occur in our time; and that time is now.

May your time at the conference be rewarding and leave you energized, ready to continue your pursuits in delivering quality healthcare that will meet the needs of the people you all serve.

Reno Keoni Franklin
Chairman, National Indian Health Board
TRIBAL LEADERS

Carlos Bullock, Chairperson, Alabama-Coushatta Tribe of Texas

Victoria Higgins, Tribal Chief, Aroostook Band of Micmacs

Donald Wayne Rodgers, Chief, Catawba Indian Nation

Clint Halftown, Heron Clan Representative, Cayuga Nation

Lonnie Martin, Chairman, Chitimacha Tribe of Louisiana

Kevin Sickey, Chairman, Coushatta Tribe of Louisiana

Michell Hicks, Principal Chief, Eastern Band of Cherokee Indians

Brenda Commander, Tribal Chief, Houlton Band of Maliseet Indians

Christine Norris, Tribal Chief, Jena Band of Choctaw Indians

Michael J. Thomas, Chairman, Mashantucket Pequot Tribe

Billy Cypress, Chairman, Miccosukee Tribe of Indians of Florida

Shawn W. Hendricks, Sr., Chief, Mashpee Wampanoag Tribe

Beasley Denson, Miko, Mississippi Band of Choctaw Indians

Bruce "Two Dogs" Bozum, Chairman, The Mohegan Tribe

Matthew Thomas, Chief Sachem, Narragansett Indian Tribe

Ray Halbritter, Nation Representative, Oneida Indian Nation

William Nicholas, Governor, Passamaquoddy Tribe-Indian Township Reservation

Richard Phillips-Doyle, Sakon/Chief, Passamaquoddy Tribe-Pleasant Point Reservation

Kirk E. Francis, Sr., Tribal Chief, Penobscot Indian Nation

Buford Rolin, Tribal Chairman, Poarch Band of Creek Indians

Michell Cypress, Chairman, Seminole Tribe of Florida

Barry E. Snyder, Sr., President, Seneca Nation of Indians

Monica M. Jacobs, Chief, St. Regis Band of Mohawk Indians

James W. Ransom, Chief, St. Regis Band of Mohawk Indians

Barbara A. Lazore, Chief, St. Regis Band of Mohawk Indians

Earl J. Barbry, Sr., Chairman, Tunica-Biloxi Tribe of Louisiana

Cheryl Andrews-Maltais, Chairwoman, Wampanoag Tribe of Gay Head (Aquinnah)
Welcome Friends, Colleagues and Supporters!

On behalf of the United South and Eastern Tribes (USET), we welcome you to Washington, DC for the National Indian Health Board’s 26th Annual Consumer Conference. We are thrilled to have you as our guests in the nation’s capital, and look forward to working and learning with you over the next few days and beyond.

This year, the National Indian Health Board (NIHB) has chosen the theme Indian Health in the Era of Health Care Reform. As we have gone through the past several months working with our Congressional representatives and their staffs, listening to Tribal Leaders in each of the twelve regions’ needs and challenges, and observing the process for change, we are in agreement that we need to work together on behalf of all American Indians/Alaska Natives to ensure that reform does not leave us behind! It is up to all of us to advocate for change—change that will provide us a fully funded health care system that will improve our lives and health.

USET is an inter-tribal organization that represents 25 federally recognized Tribes on a regional and national level. There will be an opportunity on Tuesday evening to learn more about us, where we will be presenting USET CULTURE NIGHT, showcasing our traditions, sharing our talented dancers and other performers, and providing food for the festivities. The event is at the Hyatt, so will be convenient for all. We hope to see you there!

NIHB has a program with speakers from all areas, and many representatives from Capitol Hill to update us on the health care reform debate. As legislators return from their districts, we are certain they have many stories to tell. It is up to us to remind them of our stories, of the trust obligations, and the status of our health care system.

I am certain that you will find this year’s meeting to be informative and challenging. My hope is that we all leave here with a sense of accomplishment and empowerment to return home and advocate for change.

We have many friends and supporters—our voice is being heard—let it ring through the hills! Let Indian Country remain united in our commitment and resolve, let the passion for our children and healthy vibrant communities be the reward for your duty and all your hard work.

In humble appreciation of your efforts -
Yaw’Ko - a Big heartfelt Thank You

Scan - in peace

Brian Patterson, President
United South and Eastern Tribes, Inc

"Because there is strength in Unity"
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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.

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**What is the National Indian Health Board?**
The National Indian Health Board (NIHB) is a 501©(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 they 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 the 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 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 36 years, 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 decision at the federal level and changes in mainstream healthcare 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 Chairman, Vice-Chairman, Treasurer, Secretary and Member-at-Large who serve two –year appointments with staggered terms. The Board of Directors meets quarterly.
United States Senate
WASHINGTON, DC 20510-7012

September 14, 2009

Mr. Reno Keoni Franklin
Chairman
National Indian Health Board
926 Pennsylvania Avenue, SE
Washington, DC 20006

Dear Chairman Franklin,

Welcome to you, fellow members of the National Indian Health Board, tribal leaders, health care administrators and providers, and others who have gathered in Washington, DC for your annual consumer conference, Indian Health in the Era of Health Care Reform.

During my years in the U.S. House of Representatives and the U.S. Senate, I have worked with my colleagues to expand access to health care services and ensure people receive the care they need. Over the years, we expanded Medicaid services to cover those most in need, particularly children. We provided more help to seniors in getting prescription drugs, removed barriers for individuals to access mental and behavioral health services, and focused on expanding preventative health programs, such as the special diabetes programs.

Working with President Obama, the 111th Congress has continued to focus on health care issues, including those most important to Indian Country. We reauthorized the State Children's Health Insurance Program — among other things, a law making it easier for tribes to enroll eligible members in Medicaid and CHIP. With enactment of the American Recovery and Reinvestment Act, we dramatically increased funding for Indian Health Services and other federal health programs serving Indian Country, and our budgets and appropriations for this year and next reflect additional increases. I am working with Senator Byron Dorgan, chairman of the Senate Committee on Indian Affairs, and tribal health advocates to build on the Senate's success in the 110th Congress and reauthorize the Indian Health Care Improvement Act. And, of course, I am working closely with Senators Max Baucus, Chris Dodd, Jeff Bingaman and many others to bring national health care reform legislation before the Senate.

As conference speakers and attendees consider the NIHB’s ambitious conference agenda, many of these issues will be debated. I look forward to hearing the recommendations from you and others on how Congress can improve our efforts in serving Native Americans and ensure reform efforts reach those in Indian Country.

My best wishes to you.

Sincerely,

Harry Reid

HARRY REID
United States Senator
August 26, 2009

Reno Keoni Franklin
Chairman
National Indian Health Board
926 Pennsylvania Ave SE
Washington, District of Columbia 20003-2140

Dear Chairman Franklin:

I regret that I am unable to attend the 26th Annual National Consumer Conference of the National Indian Health Board here in Washington, D.C. I would like to extend my warmest greetings to all who are able to attend.

The theme for the conference, "Indian Health in the Era of Healthcare Reform," is very pertinent given Reform has been on my agenda for the past year and a half. We began multiple hearings in 2008 culminating in a "white paper" in November 2008 and initiated work on health care reform in January 2009. As you have read in the newspapers, we are still working to get a bi-partisan bill marked up in the Finance Committee.

I am optimistic we will reach an agreement on many controversial issues so we can move ahead and provide health care coverage to over 46 million currently uninsured Americans. I have proposed a number of issues affecting Native Americans with the help of organizations such as the National Indian Health Board that will merge the interests of American Indians and their unique Government to Government relationship with any plans for health care reform.

As we proceed through the ongoing negotiations, it is very important to take into account the trust responsibility this Country owes its First People. There is much work to be done, and conferences such as yours do much to set the issues and arrive at possible conclusions.

Thank you again for all your hard work. I wish you a productive meeting.

With best personal regards, I am

Sincerely,

MB/rs

MAX BAUCUS
MONTANA
Dear Friends:

Greetings to all Indian health advocates attending the National Indian Health Board’s 26th Annual Consumer Conference, in Washington D.C. The theme of “Indian Health Care in the Era of Reform” is a timely topic. With health care at the forefront of the Country’s mind, I hope that this year we will be successful in enacting Indian health care improvement legislation.

I would like to acknowledge the hard work of the National Indian Health Board and Indian health advocates from across the country. Your advocacy and dedication to improving the Indian health care system and raising the health status of Native Americans throughout the United States is important and honorable work. I congratulate you on all of your accomplishments and look forward to continuing to work with you.

As all of you know, the Indian health care system is outdated and underfunded. Last year, with your help, we were able to pass the Indian Health Care Improvement Act out of the Senate. Unfortunately, the House of Representatives was unable to pass companion legislation. As Chairman, I will continue to make health care a top priority for the Senate Committee on Indian Affairs. I am committed to ensuring that the United States fully funds the Indian health system and that the government finally fulfills its trust responsibility to provide health care to Native Americans.

Thank you again for attending the Conference and for your commitment to Indian health issues.

Sincerely,

BYRON L. DORGAN
Chairman
Reno Keoni Franklin  
Chairman  
National Indian Health Board  
926 Pennsylvania Avenue, SE  
Washington, DC 20003  

Dear Chairman Franklin,

Thank you for inviting me to participate in the National Indian Health Board’s 26th Annual National Consumer Conference. Although I am unable to attend, I am delighted to send my greetings to all of you!

Over the years, past funding levels have resulted in the rationing of health care on the reservations. I have not supported this policy, and have done my best to rectify this situation. I am proud to say that as Chairman of the Senate Budget Committee, my fiscal year (FY) 2009 and FY 2010 budget resolutions included increased funding for Indian Health Care. As a member of both the Indian Affairs Committee and Finance Committee, be assured that I will continue to fight to improve health care for tribal members as the Senate considers health care reform legislation.

I commend the National Indian Health Board for your tremendous efforts to improve health care for all American Indians and Alaska Natives. I wish you another successful conference, and look forward to continuing our work together towards ensuring that Indian Country has better access to quality health care.

Sincerely,

KENT CONRAD  
United States Senator
Dear Friends:

Welcome to Washington! Though I am unable to join you in person at the 26th Annual National Consumer Conference, I am delighted to hear about the many tribal leaders, health care providers and others that will be joining together in support of Indian Health Care.

Your dedication to bringing awareness to issues affecting the American Indians and Alaska Natives is commendable. This year’s theme, “American Indian and Alaska Native Health Care in the Era of Reform,” is timely as we work to improve our nation’s health care system.

Best wishes for a successful conference!

Sincerely,

Carl Levin

Michigan
Dear Friends:

I would like to extend to you my sincere welcome to Washington and to the National Indian Health Board’s 26th Annual National Consumer Conference. As the nation continues to debate health care reform, your theme, “Indian Health in the Era of Health Care Reform,” is timely. I share with you the goal to improve the status and delivery of health care to our nation’s first Americans.

As a member of the Senate Committee on Health Education Labor and Pensions, I was able to negotiate 19 amendments to the committee’s national health care reform bill that would expand the eligibility of various grant programs to Indian tribes, as well as several technical improvements.

As Vice Chair of the Senate Committee on Indian Affairs during the 110th Congress, reauthorizing the Indian Health Care Improvement Act was the number one priority of Chairman Dorgan and I. We were successful in gaining passage by the full Senate on February 26, 2008, with a vote of 83-10. As work to reauthorize the bill continues in the 111th Congress, I look forward to working with the National Indian Health Board and its member tribes.

As you know, the improvement of health services on Indian reservations and in Alaska Native communities is long overdue. The challenges that face Native communities are indeed great. I remain committed and hopeful to seeing the reauthorization of the Indian Health Care Improvement Act during the 111th Congress.

Thank you all for your efforts and tireless work to improve the health status of American Indians and Alaska Natives. Again, I welcome you to Washington and I wish you a successful conference.

Sincerely,

[Signature]

Senator Lisa Murkowski
U.S. Senator for Alaska
September 14, 2009

Mr. Ron Kconi Franklin
Chairman
National Indian Health Board
926 Pennsylvania Avenue SE
Washington DC 20003

Dear Mr. Franklin,

It is my honor to greet the attendees of the National Indian Health Board’s 26th Annual Consumer Conference. The conference’s focus on reforming Indian health care is of upmost importance. As a member of the Senate Indian Affairs Committee, I greatly appreciate the National Indian Health Board’s (NIHB) efforts in advocating for Indian health care reform.

Despite treaty commitments and federal trust responsibilities, American Indians and Alaska Natives suffer some of the worst health disparities in our nation. Death rates from preventable causes like diabetes and alcoholism are proportionately higher in Indian Country than in the rest of the population.

During the 111th Congress, the Indian Affairs Committee has held a number of listening sessions and hearings on Indian health care. Under Chairman Byron Dorgan’s leadership, with my support, the committee is working on a bill to reauthorize the Indian Health Care Improvement Act (IHCIA) and reform the Indian health care system. The health care system serving American Indians and Alaska Natives is antiquated and chronically underfunded. I will continue to seek input from tribal leaders and organizations while we work to reauthorize the IHCIA and to achieve its permanent status.

Given the current focus on national health care reform, we are in a unique position to significantly improve Indian health policy by reducing health disparities, narrowing funding gaps, and improving access to quality care. I am encouraged that President Obama’s FY2010 budget included a historical 13 percent increase for the Indian Health Service (IHS). Additionally, I am pleased that the Senate confirmed Dr. Yvette Roubideaux as IHS Director. As a member of South Dakota’s Rosebud Sioux Tribe, Dr. Roubideaux has been a tireless champion for Indian health causes, and I look forward to working with her in her new capacity.

I would like to sincerely thank all of the conference participants for your commitment to this critical topic. I wish you a productive and enjoyable conference.

Sincerely,

Tim Johnson
United States Senate
Tribal Leaders, health professionals, and other delegates:

Welcome to the Nation’s Capitol for the National Indian Health Board Annual Consumer Conference. The year’s conference “Indian Health in the Era of Healthcare Reform” is particularly timely as Congress debates reforms for our health care system.

The health of tribal communities underscores all other aspects of community life, including building capabilities for economic development. I appreciate that we have very dedicated tribal leaders and health professionals who understand that concept and are committed to transforming the Indian health care system into a 21st Century model.

The success in that transformation lies in seeking the best practices and proactive approaches in health care which starts with prevention: by making healthy food choices, exercising the body and mind, and, along with parents, leading by example.

The Committee on Indian Affairs has been working with Indian Country to reform the Indian health system for years. There is still work ahead of us and I urge you to unite in reforming the Indian health system.

Thank you for all your work in developing healthier Indian communities. Best wishes for a successful conference.

Sincerely,

John Barrasso
Senator John Barrasso, M.D.
Vice Chairman
Senate Committee on Indian Affairs
Chairman Reno Franklin  
National Indian Health Board  
926 Pennsylvania Avenue, SE  
Washington, DC 20003  

Dear Chairman Franklin and tribal leaders:

Welcome to Washington! Thank you for inviting me to address the 26th Annual National Consumer Conference. I am sorry I cannot join you in person, but I appreciate the opportunity to share my views and highlight some of the important work the Senate is doing to improve healthcare for American Indians. Every tribal leader I meet expresses the need to improve healthcare as their number one priority, and I’m working in the Senate to do my part.

Your conference could not be better timed. As you know, America is caught up in healthcare reform debate, and I’m glad you’re contributing. You can be sure that as a member of the Senate Indian Affairs Committee and having 11 tribes and 7 reservations in my state, I’ll fight to ensure that we improve it for American Indians right along with everybody else.

American Indians and Alaska Natives are roughly twice as likely to be uninsured as the rest of the population. By providing health insurance choices to all Americans and providing premium assistance to make it affordable, health insurance reform will significantly reduce disparities in accessing high-quality health care for everybody, both Indian and non-Indian.

As you know, the President and members of Congress are working hard to craft solutions to our broken system. In those efforts, I look forward to working with you to ensure that we not only preserve the Indian Health Service, but strengthen it. The Senate took a good step last year by passing the Indian Health Care Improvement Act. Unfortunately, the House did not follow. In addition to passing it into law this year, we hope to improve a number of other aspects of Indian healthcare. Please support, and encourage others to support the President and Congress in those efforts.

Again, thank you for inviting me to address your conference. I appreciate your good work and look forward to working with you to improve healthcare for American Indians.

Sincerely,

Jon Tester  
United States Senator
Dear Friends:

It is my distinct honor to bring you greetings on the occasion of the 26th Annual National Consumer Conference of the National Indian Health Board.

The theme of this year’s conference, “American Indian and Alaska Native Health Care in the Era of Reform,” speaks to your continued dedication to ensure and improve health care for American Indians and Alaska Natives through the current national health care reform, the Indian Health Care Improvement Act reauthorization bill, and reform of the Indian Health Service. I believe that American Indians and Alaska Natives, and all Americans, should have access to quality medical care.

The National Indian Health Board’s efforts to advocate on behalf of American Indians and Alaska Natives have a great impact. Thank you for all of the work you do to improve health care. As Speaker of the House, I look forward to continuing to work with you to improve the well-being of the American Indian and Alaska Native communities.

Best wishes for a successful conference.

best regards,

NANCY PELOSI
Speaker of the House
Dear Friends,

It is with great pleasure that I welcome you to the National Indian Health Board’s (NIHB) 26th Annual National Consumer Conference. The theme, “Indian Health in the Era of Healthcare Reform,” is extremely fitting given the current healthcare debate taking place in our nation. In the midst of this debate, we need to work together to ensure that improving health care for American Indians and Alaskan Natives remains a priority.

As Chair of the House Native Americans Caucus and a member of the House Natural Resources, I have long championed the reauthorization of the Indian Health Care Improvement Act. The improvements to quality health services that this bill would provide to Indian Country are long overdue.

In addition to reauthorizing the Indian Health Care Improvement Act, we must continue to invest in research and outreach to address the growing epidemic of diabetes and other conditions which disproportionately affect Native Americans. Congress must secure more funding for the Indian Health Service so that it can better provide essential medical services to all Native Americans across the United States.

I commend the steadfast advocacy of the National Indian Health Board. This conference is a wonderful opportunity for tribal leaders, federal representatives and health care providers to join together to advanced health care quality and accessibility for Native Americans and Alaskan Natives. I pledge to work with you and will my colleagues in Congress to move forward federal legislation that will address the unmet health needs of Indian Country.

I thank you for your dedicated efforts on behalf of improving the health and well being of American Indians and Alaska Natives and wish you a successful conference.

Sincerely,

Dale E. Kildee, M.C.
Dear Friends:

It is my great honor to write these words of welcome to the National Indian Health Board’s (NIHB) 26th Annual National Consumer Conference. This conference provides a wonderful opportunity for tribal leaders, healthcare providers, and supporters of Indian Health to all come together to advocate for improved access to health care for American Indians and Alaskan Natives.

Already this year we have made great strides towards improving access to quality health care services for Indian Country. As Chairman of the Energy and Commerce Subcommittee on Health, I was able to include vital components of the Indian Health Care Improvement Act into the Children’s Health Insurance Program Reauthorization and the American Reinvestment and Recovery Act. Both of these bills were signed into law in the beginning of this year.

We have also included key provisions in the House of Representatives health reform package that will improve access to quality care in Indian Country. There are provisions that will help individuals cover the cost of insurance premiums and provisions to expand the Medicaid program. There are also crucial prevention and wellness grants that are aimed at eliminating health care disparities.

In addition to all the work we have done already, we must also work together to reauthorize the Indian Health Care Improvement Act, a bill I introduced earlier this summer. This legislation will greatly improve the quality and delivery of health care services in Indian Country and it remains one of my top priorities.

I would like to congratulate the National Indian Health Board for its tireless work on behalf of American Indians and Alaskan Natives. Your efforts have raised awareness in Congress of the need to improve the quality and accessibility of health care for Native Americans and I look forward to working with you all to achieve our goal of moving federal legislation forward.

Sincerely,

Frank Pallone Jr.
MEMBER OF CONGRESS
August 26, 2009

Mr. Reno Keoni Franklin
Chairman
National Indian Health Board
926 Pennsylvania Avenue, SE
Washington, DC 20003

Dear Chairman Franklin,

Welcome to Washington, DC! Please extend my greetings to all attendees of the National Indian Health Board’s 26th Annual Consumer Conference. I regret that I cannot be with you in person, but it is my hope that you will enjoy your time in the city.

Recently, I have had the pleasure of spending a month with my constituents in Alaska, where 20% of the state population is American Indian and Alaska Native. I have had the opportunity to speak with constituents from varying parts of the state who are consumers of IHS services, and many of the concerns are the same: IHS underfunding, particularly in the area of contract support, and the failure to reauthorize the Indian Health Care Improvements Act. I know that many of you hold these same concerns.

I’m very proud of the direction that the new Congress has taken in funding IHS. The Interior, Environment, and Related Agencies appropriations bill for FY2010 contained $4.05 billion for IHS services—a 13% increase over FY2009 funding. As many of you know, the Indian Health Care Improvements Act has been reintroduced in the House by Chairman Frank Pallone of the Committee on Energy and Commerce’s Health Subcommittee. We’ll continue working to find support among members of both parties, and I’m hopeful that we will see this legislation pass during this Congress.

Again, I thank all of you for coming to Washington, DC, and I applaud your commitment to Indian health. Best wishes on a successful conference!

Sincerely,

DON YOUNG
Congressman for All Alaska
National Indian Health Board
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 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.

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.

COTTINGHAM & BUTLER
(formerly Baker Tilly Employee Benefits, LLC) specializes in providing employee benefits consulting services, including compliance, strategic planning, human resources, and wellness strategies. Wisconsin-based, the firm has worked with many tribes in helping to develop wellness programs and human resource benefits offerings and has been a multi-year sponsor of NIHBI's Annual Consumer Conference.

HOBBS, STRAUS, DEAN & WALKER
The law firm of Hobbs, Straus, Dean & Walker, LLP is dedicated to providing high quality legal services, including advocacy before federal, state and local governments, agencies and courts, to Indian and Alaska Native tribes and tribal organizations throughout the United States. With their home office in Washington DC, they also have locations, in Portland, OR; Oklahoma City, OK; and Sacramento, CA. Their clients include tribes, tribal organizations and individual Indians in all regions of the United States, including Alaska.

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.
MORONGO BAND OF MISSION INDIANS

The Morongo Band of Mission Indians is this year’s NIHB Annual Consumer Conference Badge Sponsor. It is one of the 562 federally-recognized American Indian/Alaska Natives tribes in the United States. On both community outreach and social education fronts, Morongo has taken a leadership role. The Morongo tribe’s progress is a case history that illustrates how combining a pro-active tribal government with sound economic development can enable tribes to turn their lives and communities around and dramatically impact the surrounding region. The Morongo Band of Mission Indians is actively working with government and community leaders to explore the best paths of future development and planning that will yield a better quality of life for this generation and for generations to come.

POARCH BAND OF CREEK INDIANS

The Poarch Creek Indians is a segment of the original Creek Nation, which avoided removal and has lived together for nearly 150 years. Today, there are nearly 2,340 members of the Poarch Band of Creek Indians of which over 1,000 live in the vicinity of Poarch, Alabama. Since the early 1900’s organized efforts have increased the social and economic situation of the Poarch Creeks and many educational gains were made in the 1940’s. The Tribe is the only federally-recognized Tribe in the state of Alabama.

ROCHE DIAGNOSTICS USA

Roche Diagnostics has a proud history and continued commitment to innovating health information with products and services that make a difference by helping to improve the quality of life. As a research-focused healthcare company, Roche discovers, develops and provides innovative diagnostic and therapeutic products and services that deliver significant benefits to patients and healthcare professionals – from early detection and prevention of diseases to diagnosis, treatment and treatment monitoring.

SENSE, INC.

SENSE, founded in April 1979, operates under the premise that Tribes and Tribal Organizations need a Washington, D.C. representative service to keep them apprised of emerging issues within the Administrative, Legislative and Judicial branches of the United States Government.

SONOSKY, CHAMBERS, SACHSE, ENDRESON & PERRY LLP

Sonosky, Chambers, Sachse, Endreson & Perry, LLP is a national law firm devoted to representing Native American interests in a wide range of endeavors including trial and appellate litigation, federal Indian law, tribal law, Indian self-determination and self-governance matters, health law, commercial and corporate law, tax law, land claims, natural resources law, public land law, water law, land regulation, hunting and fishing rights, environmental law, toxic torts, jurisdictional conflicts, gaming law, government contracting, hydroelectric development and business development.

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. NIHB thanks USET for this year’s sponsorship on the 2009 Annual Consumer Conference!

WEBMD HEALTH SERVICES

WEBMD HEALTH SERVICES

WebMD and its network of consumer sites help individuals take an active role in managing their own health and wellness. They provide relevant, timely and objective lifestyle and condition information that is developed by an award-winning editorial staff which includes medical writers and editors, physicians and health educators.

Their interactive services enable consumers to obtain in-depth information on a particular disease or condition, research and plan for a healthy lifestyle goal, search for relevant health information across the web, and watch originally produced videos. They have developed unique features that help consumers check symptoms, locate physicians, assess your personal health status, receive e-newsletters and alerts, and participate in online communities with peers and medical experts.
# Workshops at a Glance

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| Workshops 1 | The Healthy Indian Country Initiative | Tribal Epidemiology Centers | Recruitment & Retention of AI/AN Students | Successful Prevention Approaches to Drug Use | Showcasing Successful Obesity Programs |  | |
|-------------|--------------------------------------|-----------------------------|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|  | |
| 1:30 - 2:50 PM | Workshops 1 |  |  |  |  |  |  |

| Workshops 2 |  |  |  |  |  |  |  |
|-------------|-------------|-----------------------------|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|  | |
| 3:15 - 4:45 PM |  |  |  |  |  |  |  |

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WEDNESDAY, SEPTEMBER 16

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National Indian Health Board
NIHB 26TH ANNUAL CONSUMER CONFERENCE AGENDA

PRE-CONFERENCE MEETINGS

MONDAY, SEPTEMBER 14, 2009

1:00 - 5:00 pm  Lower Level Foyer (below hotel registration desk)  Registration Open

5:30 - 7:00 pm  Thornton Room, eleventh floor  Welcoming Reception  Hosted by the Tribes of the Nashville Area through the support of United South and Eastern Tribes, Inc.

AGENDA

TUESDAY, SEPTEMBER 15, 2009

7:00 am - 5:00 pm  Lower Level Foyer (below hotel registration desk)  Registration and Information Desk Open

7:00 - 8:30 am  Regency Ballroom Foyer  Continental Breakfast Served  Sponsored by: Albuquerque Area Indian Health Board

8:00 - 8:15 am  Regency Ballroom  Opening Ceremony/Prayer
  Procession:  National Indian Health Board, Board of Directors  United South and Eastern Tribes, Inc. Board Members  Presentation of the Colors  Prayers

8:15 - 8:30 am  Regency Ballroom  Opening Remarks and Welcome  Indian Health in the Era of Healthcare Reform  Reno Keoni Franklin, Chairman, National Indian Health Board, Inc. (California Area)
  Brian Patterson, Chairman, United South and Eastern Tribes, Inc.
  Buford Rolin, Vice-Chairman, National Indian Health Board (Nashville Area)

8:30 - 9:15 am  Regency Ballroom  The Honorable Kathleen Sebelius, Secretary, United States Department of Health and Human Services  Keynote Address:  American Indian and Alaska Native Health Care in the Era of Reform

9:15 - 9:30 am  Regency Ballroom  The Honorable Byron Dorgan, United States Senator - North Dakota  Chairman, Senate Committee on Indian Affairs (invited)  Keynote Address:  Health Care Reform and Indian Country: Achieving Improved Health Care for the Nation

9:30 - 10:00 am  Regency Ballroom  The Honorable Yvette Roubideaux, MD, MPH, Director, Indian Health Service  Keynote Address:  The Indian Health Service in the Era of Reform

10:00 - 10:15 am  Regency Ballroom  The Honorable Frank Pallone, United States House of Representatives - New Jersey  Chairman, House Energy and Commerce Committee, Subcommittee on Health and Sponsor of HR 2708, “The Indian Health Care Improvement Act Amendments of 2009”  Keynote Address:  Prospects for Advancing Indian Health Care During the 111th Congress

10:15 - 10:30 am  Regency Ballroom  The Honorable Lisa Murkowski, United States Senator - Alaska, Senate Committee on Health Education Labor and Pensions  Protecting American Indians and Alaska Natives in Health Care Reform: What is at Stake?

10:30 - 10:45 am  Regency Ballroom  The Honorable John Barasso, United States Senator - Wyoming, Senate Committee on Indian Affairs (invited)  Health Care Reform and Indian Country: Perspectives of the Vice Chairman - Member: Honoring the Trust

10:45 - 11:30 am  Regency Ballroom  Panel Discussion  Health Care Reform: The View from the Trenches  MODERATOR: Stacy A. Bohlen, Executive Director, NIHB  Richard Litsey, Counsel and Senior Advisor for Indian Affairs, Senate Committee on Finance, Majority Staff  Brenda Shore, Senior Policy Advisor, Senate Committee on Indian Affairs, Majority Staff  Bobby Clark, Senior Policy Advisor, House Committee on Energy and Commerce, Subcommittee on Health  Marie Howard, Staff Director, House Committee on NATural Resources, Majority Staff  Rhonda Harjo, Deputy Chief Counsel, Minority Staff
11:30 - 11:45 am  Regency Ballroom
Envisioning a Healthier Indian Country; House Native American Caucus and Its Work to Advance American Indian and Alaska Native Health
The Honorable Dale Kildee, United States House of Representatives - Michigan, Chairman, House Native American Caucus

11:45 - 1:00 pm  Lunch On Your Own

1:00 - 1:15 pm  Regency Ballroom
Self Governance Tribes Perspective on Health Care Reform
Government Run Health Care Delivery Works
Jefferson Keel, Lt. Governor, Chickasaw Nation, Chairman, Tribal Self-Governance Advisory Committee
Ron Allen, Chairman, Jamestown-S’Klallam Tribe, Vice-Chairman, Tribal Self-Governance Advisory Committee

1:15 - 1:30 pm  Regency Ballroom
Direct Service Tribes Perspective on Health Care Reform
Creating Opportunities for Improved Access and Delivery
Council of Large Land-Based Tribes (CLLLBT)
Ron His Horse Is Thunder, Chairman, CLLLBTT, Chairman, Standing Rock Nation
Direct Service Tribes Tribal Advisory Committee (DSTAG)
Andrew Joseph, Jr., NIHB Executive Committee Member (Portland Area), Vice-Chairman, DSTAG

1:30 - 2:00 pm  Regency Ballroom
The White House Health Care Reform
Debunking Myths and Planning for Success
Kimberly Techee, JD, Senior Policy Advisory, Native American Affairs, Domestic Policy Council, The White House

WORKSHOPS I

2:00 - 3:30 pm  Columbia B  Workshop
Contract Support Cost (Repeating Session)
Chronic underfunding has starved the Indian Health Services delivery system; the Indian Self-Determination and Education Assistance Act requires administrative costs support. This session will focus on assisting Tribes in addressing shortages of Contract Support Cost funding.
MODERATOR: Lester Secatero, NIHB Board Member (Albuquerque Area) Chairperson, Albuquerque Area Indian Health Board
Ronald Allen, MEd, Chairman, Jamestown-S’Klallam Tribe
Geoffrey Strommer, Esq., Hobbs, Straus, Dean & Walker
Lloyd Miller, Esq., Sonosky, Chambers, Sachse, Miller & Munson, LLP

2:00 - 3:30 pm  Congressional A  Workshop
Budget Formulation
Understanding the budget formulation process plays a critical role in Health Care Reform, and the US Department of Health and Human Services (DHHS) budget are key to Tribal efforts to meet the needs of communities that will be affected by reform legislation.
MODERATOR: H. Sally Smith, NIHB Board Member (Alaska Area), Chair, Board of Directors, Bristol Bay Area Health Consortium
Tribal Consultation on Budget Formulation
Darryl Red Eagle, Co-Chair, National Tribal Budget Formulation Committee
DHHS Department-Wide Tribal Budget Consultation Process
Stacey Ecoffey, Principal Advisor for Tribal Affairs, Office of Intergovernmental Affairs (OIG)
Anna Arroyo, Program Reviewer, Office of Management and Budget
Congressional Perspective
Nathan Bergerbest, Legislative Assistant to US Senator Lisa Murkowski

2:00 - 3:30 pm  Columbia A  Workshop
Health Care Reform and Indian Country – What Will It Mean?
How has health care reform already influenced Indian Country and what will the future hold for Tribes?
MODERATOR: Reno Keoni Franklin, NIHB Chairman (California Area), Chair, California Rural Indian Health Board (CRIBH)
Myra Munson, Esq., JD, MSW, Sonosky, Chambers, Sasche, Miller & Munson, LLP
Jennifer Cooper, Esq., JD, MPA, Legislative Director, NIHB
Carol Barbero, Esq., Hobbs, Straus, Dean & Walker
Valerie Davidson, Esq., Senior Director, Legal & Intergovernmental Affairs, Alaska Native Tribal Health Consortium

2:00 - 3:30 pm  Bunker Hill  Workshop
Utilizing Traditional Medicine: Understanding the Gifts of Healing
Traditional healing has long been an integral component to achieving optimal wellness in Native American and Alaska Native cultures and incorporates respect and understanding of the gifts around us; various Tribal perspectives will be offered.
MODERATOR: Ron Demary, Acting Director, IHS, DTP/DSTAC

Ron Demary, Acting Director, IHS, DTP/DSTAC
MODERATOR: L. Jace Killsback, NIHB Board Member (Billings Area), Tribal Council Member, Northern Cheyenne Busby District

Traditional Healing Modalities: Navajo Nation
Ernest Harry Begay, Traditional Practitioner, Navajo Department of Behavioral Health Services
Zella Weaver, LISW, LCSW, CAD, Clinical Director, Navajo Department of Behavioral Health Services

Nuku Model of Health Care
Ileen Sylvester, MBA, Vice President of Executive and Tribal Services, Southcentral Foundation, Alaska
Dr. Ted Mala, Director of Tribal Relations and Traditional Healing, Southcentral Foundation

Tradition & Health: Respecting the Gift of Food
Jean Charles-Azore, MPH, RD, IHS Principal Nutrition Consultant, Indian Health Service

2:00 - 3:30 pm Ticonderoga Workshop
Contract Health Services and Health Care Reform
CHS is a primary element of health care access for American Indian/Alaska Native people. What role will CHS play in Health Care Reform?

MODERATOR: Thomas (Tom) John, NIHB Board Member (Oklahoma City Area), Health Administrator, Chicksaw Nation

Government Attempts to Tax CMS Benefits
James Allen Crouch, MPH, Executive Director, California Rural Indian Health Board

CHS Distribution: A Frank Discussion
Erin Bailey, Health Policy Advisor, Senate Committee on Indian Affairs, Majority Staff

Future Directions and Opportunities

2:00 - 3:30 pm Concord Workshop
Reducing Risk: New Initiatives and Innovations in Injury Prevention, Suicide and Methamphetamine
Injury and trauma related deaths, methamphetamine abuse and suicide are growing issues in Indian Country; new strategies may assist Tribes in reduction of these risks to the health of our communities.

MODERATOR: Andrew Joseph, Jr., NIHB Board Member (Portland), Chairman, Confederated Tribes of Coosville Tribal Methamphetamine/Suicide Prevention Initiative

Bryan Wooden, Acting Director, Division of Behavioral Health, Indian Health Service
Suicide Prevention Resource Center: Support for Native American Communities in Suicide Prevention Initiatives

Petrice Post, MA, Tribal Prevention Specialist, Suicide Prevention Resource Center

Injury Prevention
David R. Boyd, MD, FACS, National Injury Prevention Coordinator, Office of Emergency Services, Clinical and Preventive Services, Indian Health Service

2:00 - 3:30 pm Lexington Workshop
The Importance of Advocacy in Indian Country: Effective Tools and Techniques to Make Your Voices Heard and to Move Legislators to Action
This workshop will provide participants with background on advocacy at the federal level and why such efforts are a critical part of affecting the legislative process. In addition, panelists will discuss specific tools, strategies, and approaches to recruiting advocates, training community members to be effective advocates, effective activities at the local level to affect change at the federal level, and cultivating the support of policymakers. Participants will hear different perspectives on 'real world' advocacy campaigns and candid discussions on what works and what doesn't in moving legislators to action.

MODERATOR: Ronnie Tepp, NIHB Consultant, Technical Lead, Special Diabetes Program for Indians

PANELISTS:
Michael Kondratick, Director of Grassroots Advocacy, Juvenile Diabetes Research Foundation
Kristina Davis, Montana State Director, Children's Defense Fund

John Dunagan, Democracy Data Communications/OnPoint

2:00 - 3:30 pm Congressional B Workshop
HIV: Perspectives on Initiatives in Indian Country
HIV/AIDS is a growing concern in much of Indian Country; this presentation will discuss the challenges and initiatives addressing this increasing prevalent health problem in our Native American populations.

Geoffrey Roth, Chairman, National Native American AIDS Prevention Center.

2:00 - 3:30 pm Grand Teton Workshop
Family Based Approaches to Health in American Indian/Alaska Native Communities
Case studies demonstrate the effectiveness of American Indian paraprofessionals as home visitors and evaluators, particularly important in communities that have nursing shortages and cultural preferences for Native interventionists. The in-home, family-based approach used in these projects addresses several care-seeking obstacles among American Indian youth.

MODERATOR: Jerry Freddie, Board Member, National Indian Health Board (Navajo Nation)

Mary Cwik, Ph.D., Faculty, Johns Hopkins Bloomberg School of Public Health Center for American Indian Health
Olivia Belen-Sloan, Staff, Johns Hopkins Bloomberg School of Public Health, Center for American Indian Health, Johns Hopkins School of Public Health

3:30 - 3:45 pm Networking Break
Hearty and Healthy Snacks. Meet the Vendors!
Sponsored by: Sense, Inc. and Hobbs, Straus, Dean and Walker, LLP
3:45 - 5:15 pm  Columbia B  Workshop
Contract Health Services and Health Care Reform

**Repeating Session**

CHS is a primary element of health care access for American Indian/Alaska Native people. What role will CHS play in Health Care Reform?

**MODERATOR:** Thomas (Tom) Johns, NIHB Board Member (Oklahoma City Area), Health Administrator, Chickasaw Nation

**Government Attempts to Tax CMS Benefits**

James Allen Crouch, MPH, Executive Director, California Rural Indian Health Board

**CHS Distribution: A Frank Discussion**

Erin Bailey, Health Policy Advisor, Senate Committee on Indian Affairs, Majority Staff

**Future Directions and Opportunities**

3:45 - 5:15 pm  Columbia A  Workshop

Contract Support Cost (Repeating Session)

Chronic underfunding has starved the Indian Health Services delivery system; the Indian Self-Determination and Education Assistance Act requires administrative costs support. This session will focus on assisting Tribes in addressing shortages of Contract Support Cost funding.

**MODERATOR:** Cathy Abramson, NIHB Board Member, (Bemidji Area), Councilwoman, Sault Ste. Marie Chippewa

**Geoffrey Strommer, Esq.,** Hobbs, Straus, Dean & Walker

**Lloyd Miller, Esq.,** Sonosky, Chambers, Sachse, Miller & Munson, LLP

**Ronald Demaray, MEd,** Acting Director, Office of Tribal Programs, Indian Health Service

3:45 - 5:15 pm  Congressional A  Workshop

Self Governance Tribes perspective on Health Care Reform

Since the implementation of the first Self-Governance compact and funding agreement in 1993, there have been remarkable accomplishments throughout Indian Country as Tribes and Tribal Organizations have assumed responsibility for delivering health care services in their communities. A one-size fits all approach to health care does not work for American Indians and Alaska Natives. Self-Governance has allowed Tribes to be innovative and forge a new agenda in administering and managing health care for Indian People. Essentially, ‘government run’ health care delivery that is responsive and works.

**MODERATOR:** Buford Rolin, Vice-Chairman, NIHB, (Nashville Area), Chairman, Poarch Creek Band of Creek Indians

**Jefferson Keel,** Lt. Governor, Chickasaw Nation, Chairman, Tribal Self-Governance Advisory Committee

**Ron Allen,** Chairman, Jamestown-S’Klallam Tribe, Vice Chairman, Tribal Self-Governance Advisory Committee

**Hankie Ortiz, Esq.,** Director, Office of Tribal Self Determination, Indian Health Service

3:45 - 5:15 pm  Lexington  Workshop

Tribal Choice: Direct Service, Self Determination, Self Governance – Factors to Consider and Experience with Expansion

The Federal government has a fundamental responsibility to deliver health care to American Indian/Alaska Native people. The Tribal decision to assume programs of the Indian Health Service under the self-determination and self-governance titles of the Indian Self-Determination and Education Assistance Act must consider many factors, including the choice to remain direct service. The differences between self-determination and self-governance will be described, their impact on tribal control and development of expanded services, including services not offered by the IHS such as the Cherokee Nation’s Program of All-Inclusive Care for the Elderly (PACE).

**MODERATOR:** H. Sally Smith, NIHB Board Member, (Alaska Area), Chair, Board of Directors, Bristol Bay Area Health Corporation

**Myra Munson, Esq., JD,** MSW, Sonosky, Chambers, Sachse, Miller & Munson LLP

**Jessica Burger, RN, ADN,** Director of Government Relations, NIHB

**Melanie Fourkiller Knight,** Secretary of State, Cherokee Nation

**Gloria Grim, MD,** Medical Director, Cherokee Nation

3:45 - 5:15 pm  Congressional B  Workshop

Role of Area Indian Health Boards in Health Care Reform

The role of the Area Health Boards is vital in representing the collective regional voice of Indian Country. Through the process of consensus building, a unified perspective can be forwarded on virtually any issue. The evolution of the Area Boards and consensus building will be discussed.

**MODERATOR:** Reno Keoni Franklin, NIHB Chairman (California Area), Chairman, California Rural Indian Health Board (CRIHB)

**Andrew Joseph, Jr.,** NIHB board Member (Portland Area), Chairman, NPAIHB, Councilman, Confederated Tribes of Colville

**Brian Patterson,** President, United South & Eastern Tribes, Inc.

**Robert Moore,** NIHB Board Member (Abbeville Area), Councilman, Rosebud Sioux

3:45 - 5:15 pm  Bunker Hill  Workshop

Transforming Care in the Indian Health System: IHS Chronic Care Initiative, Journey of Two Pilot Sites

The current IHS system grew from an acute care delivery model making it difficult to access chronic disease in our communities. The IHS Chronic Care Initiative is working with modern improvement methods to fundamentally transform the system of care for illness and prevention for the management of chronic conditions. This workshop will describe the process, share data and examples from the Sells Service Unit and Cherokee Nation.

**MODERATOR:** Charles Ty Reidhead, MD, Director, IHS Chronic Care Initiative

**Patti Whitethorne,** CEO, Sells Service Unit

**Gloria Grim, MD,** Medical Director, Cherokee Nation Health Services

3:45 - 5:15 pm  Concord  Workshop

Developing Infrastructure for Data Collection and Data Use On A Local Level

This workshop will outline the work of the Indian Health Center of Santa Clara Valley Community Wellness and Outreach Department in developing the infrastructure for ongoing program evaluation and data utilization at the local level for their diabetes prevention program. Session will
highlight the evaluation and training curriculum used in the process to develop an effective evaluation plan.

MODERATOR: L. Jace Kilsbuck, NIH Board Member (Billings Area)
Ramin Naderi, Director, Community Wellness and Outreach, Indian Health Center of Santa Clara Valley
Jan Chacon, Program Coordinator, Diabetes Prevention, Indian Health Center, Santa Clara Valley
Jami Bartgis, Ph.D., Director of TA Research, NCI/UIH

3:45 - 5:15 pm Ticonderoga Workshop
Healthy Weight For Life: A Comprehensive Strategy Across the Lifespan of American Indians and Alaska Natives
American Indians and Alaska Natives are concerned that the obesity epidemic is affecting the well-being of our communities. We all have a role to play in beating this epidemic. In this interactive workshop, participants will learn how to apply strategies for healthy weight for life.

MODERATOR: Margaret Baha-Walker, NIH Board Member (Phoenix Area), Vice-Chairwoman, White Mountain Apache
Judy Thierry, DO, MPH, Child and Maternal Health Coordinator, IHS
Captain Tammy Brown, MPH, RD, BC-ADM, CDE, Nutrition Consultant, Division of Diabetes Treatment and Prevention, Indian Health Service (IHS)
Brenda A. Broussard, MPH, MBA, RD, CDE, Nutrition Consultant, Division of Diabetes Treatment and Prevention, Indian Health Service (IHS)
Rachel Greenberg, MA, Marketing and Communications Consulting
Ben Butler, Vice President for Cottingham & Butler Consulting Services

3:45 - 5:15 pm Thornton
American Indian Cancer Policy
Cancer is emerging as a growing health concern for American Indians and Alaska Natives. Cancer incidence varies significantly among the various regions, overall cancer diagnoses are lower than the general population, and in some regions. American Indian and Alaska Native rates of cancer are significantly higher than the general population. Both the Inter Tribal Council of Arizona and the Aberdeen Area Tribal Chairman's Health Board have been addressing cancer health disparities in their regions, and this session will focus on health policy solutions to reducing the burden of cancer from regional-specific and national perspectives.

Donald Warne, MD, MPH, Executive Director, Aberdeen Area Tribal Chairman's Health Board
Kenton Lafoon, MSW, Director, Southwest American Indian Collaborative Network (SAICN), Intergovernmental Affairs Alaska Native Tribal Health Consortium - Tribal Technical Advisor Group Perspective

5:30 - 7:30 pm Regency Ballroom
CULTURE NIGHT
Hosted by the Tribes of Nashville Area
Through the Support of United South and Eastern Tribes, Inc.

WEDNESDAY, SEPTEMBER 16, 2009

CMS DAY

6:30 - 8:00 am Hotel Foyer
Just Move It! Celebrating Healthy Communities
Group walk with T-Shirt give-away.
Meet in Hotel Foyer to register

7:00 am - 5:00 pm Registration and Information Desk Open

8:00 - 9:30 am Regency Ballroom Foyer
Continental Breakfast Served

8:00 am - 5:00 pm Exhibit Hall Open

9:00 - 9:15 am Regency Ballroom
Welcome to Centers for Medicare & Medicaid Services (CMS) Day
H. Sally Smith, NIH Board Member (Alaska), Chairman, Bristol Bay Area Health Corporation and the National Indian Health Board's Representative to the CMS Tribal Technical Advisory Group (TTAG)

9:15 - 9:30 am Regency Ballroom
Keynote Address
Charlene Frizzera, Acting Administrator, CMS

9:30 - 9:45 am Regency Ballroom
Keynote Address
Valerie Davidson, Chair, CMS Tribal Technical Advisory Group and Alaska Representative; Senior Director Legal & Intergovernmental Affairs Alaska Native Tribal Health Consortium - Tribal Technical Advisor Group Perspective

9:45 - 10:45 am Regency Ballroom
Panel Discussion
Tribal and State Relations
Valerie Davidson, Chair, CMS Tribal Technical Advisory Group and Alaska Representative; Senior Director Legal & Intergovernmental Affairs Alaska Native Tribal Health Consortium (facilitator)
Charlene Frizzera, Acting Administrator, CMS
Yvette Roubideaux, MD, MPH, Director, Indian Health Service
Donald Warne, MD, MPH, Executive Director, Aberdeen Area Tribal Chairman's Health Board
Melissa Zito, Indian Health Liaison Utah State Department of Health
Selwyn Whiteskunk, Public Health Administrator, Ute Mountain Ute Tribe

10:45 - 11:10 am Regency Ballroom
CMS Communications Strategies in Indian Country
Teresa Niño, Director, Office of External Affairs
Gale Marshall, Two Feathers Media, outreach and enrollment video
3:00 pm Regency Ballroom
Tribal Consultation in Implementing the American Recovery & Investment Act and Children’s Health Insurance Program Reauthorization Act
Cindy Mann, Director, Center for Medicaid & State Operations

12:00-1:15 pm Regency Ballroom
AWARDS LUNCHEON
Budof Rolin, Master of Ceremonies
2009 Jake White Crow Award recipient:
The Honorable Lisa Murkowski
United States Senator – Alaska
Luncheon provided by the National Indian Health Board and the Mayo Clinic Spirit of Eagles Program

WORKSHOPS

1:30 - 3:00 pm Thornton Workshop
Overview of the Health Information Technology (HIT) Provisions of the Recovery Act
(this workshop will be repeated during session 2)
This session will discuss Provider HIT Adoption, Operation Payments, and Implementation Funding. It will also discuss the purpose of HIT adoption and use, what funding is available, who is eligible and what criteria must be met for incentive payments. Will also discuss what the audience should be doing now to get ready.

Rick Friedman Director, Division of State Systems, Center for Medicaid & State Operations
MODERATOR: Jim Lamb, Director of Patient Financial Services Alaska Native Medical Center and Alaska Area Alternate Tribal Technical Advisory Group Representative

1:30 - 3:00 pm Columbia A Workshop
Long Term Care in Indian Country Overview Panel
Tribal Governments are exploring solutions to address long-term health care delivery challenges through partnerships that meet the unique and diverse needs of their individual communities. This session will provide an overview of long term care in Indian Country and will include results of a survey of long term care practices in Indian Country. There will also be information on the Administration on Aging (AOA) Aging Network (Title VI) Component to long term care.

Kay Branch, MA, Elder/Rural Health Program Coordinator Alaska Native Tribal Health Consortium
R. Turner Goins, Ph.D., Associate Professor, West Virginia University
Bruce Finke, M.D., IHS / Nashville Area Elder Health Consultant, Chronic Care Initiative
Meg Graves, Aging Service Program Specialist, AOA, Office for American Indian, Alaskan Native and Native Hawaiian Programs
MODERATOR: Robert Moore, NIHB Board Member (Aberdeen); Aberdeen Area Tribal Technical Advisory Group Representative

1:30 - 3:00 pm Columbia B Workshop
(this workshop will be repeated during session 2)
This workshop will provide an overview of section 5006 of the American Recovery and Reinvestment Act and certain provisions of the Children’s Health Insurance Program Reauthorization Act. Some of these provisions include: exemption of Indians from Medicaid cost-sharing requirements, exemption of certain Indian specific property from Medicaid determination, outreach and enrollment activities, use of tribal documentation in applying for Medicaid and CHIP, and many more. Attendees will learn how these provisions will enable AI/ANs to access Medicaid and CHIP programs and benefits, and provide an opportunity for attendees to ask questions.

Kitty Marx, Director, Tribal Affairs Group/Office of External Affairs, CMS
Cyndi Gillaspie, Native American Contact, Region VIII, CMS
Lane Terwilliger, Esq., Center for Medicaid & State Operations
MODERATOR: Jim Roberts, Policy Analyst, Northwest Portland Area Indian Health Board; Portland Area Alternate Tribal Technical Advisory Group Representative
1:30 - 3:00 pm  Concord  Workshop
Grants.Gov
Do you want to take advantage of more grant opportunities? Find out how to register in grants.gov, find specific grants, apply electronically, and track applications. The session will also cover how to register for email notifications of grant opportunities and helpful tips to ensure your application is successfully completed.

Michael Pellegrino, Outreach Director, Grants.gov

1:30 - 3:00 pm  Yellowstone/Everglades  Workshop
Medicaid Behavioral Health
Each state is different in how they manage Medicaid Behavioral Health funds, and in how they combine those dollars with SAMHSA block grant funding and in how they connect (or don't connect) with tribes. This session will provide an overview of the differences in the provision of Behavioral Health services between several states in Indian Country.

Donald Warner, MD, MPH, Executive Director, Aberdeen Area Tribal Chairman's Health Board; Aberdeen Area Alternate Tribal Technical Advisory Group Representative

3:00 - 3:15 pm  Break
Sponsored by: Seventh Day Adventist Church Native Ministries

WORKSHOPS 2

3:15 - 4:45 pm  Concord  Workshop
Federally Qualified Health Centers (FQHCs)
This session will discuss the basics of FQHCs and provide an opportunity for Urban and Tribal program administrators to discuss with CMS and HRSA technical staff those issues related to Provider Types, Provider Enrollment, obtaining a Medicaid provider #, differences between FQHCs (in general), FQHC look-alikes and Tribal & Urban FQHC authorities - what they are, what the program requirements are and what they must provide and discuss the benefits of becoming an FQHC.

MODERATOR: Dorothy A. Dupree, B.S., M.B.A., Director, Tucson Area IHS
Geoffrey Roth, Executive Director, National Council of Urban Indian Health
Tonya Bowers, Health Resources and Services Administration
Cecile Greenway, Native American Contact, Region X, CMS
Paula Hammond, Region VI, CMS
Stacey Shuman, CMS Native American Contact, Region VI, Dallas

3:15 - 4:45 pm  Yellowstoe/Everglades  Workshop
Long Term Care Specific Programs
This session will discuss specific long term care programs such as Cherokee Pace program, money follows the person (MFP), and home and community based waivers. The session will explore how Tribes are achieving success through identification of resources for partnerships and by overcoming barriers to establishing long-term care health delivery systems.

Melissa Gower, Group Leader, Health Services and Government Relations Cherokee Nation

Anita Yuskauskas, Ph.D., Technical Director of HCBS Quality, CMS
John Sorensen, Project Officer & Outreach Coordinator for the MFP Demonstration, CMS
MODERATOR: Robert Moore, NIH Board Member (Aberdeen); Aberdeen Area Tribal Technical Advisory Group Representative

3:15 - 4:45 pm  Columbia B  Workshop
This workshop will provide an overview of section 5006 of the American Recovery and Reinvestment Act and certain provisions of the Children’s Health Insurance Program Reauthorization Act. Some of these provisions include: exemption of Indians from Medicaid cost-sharing requirements, exemption of certain Indian specific property from Medicaid determination, outreach and enrollment activities, use of tribal documentation in applying for Medicaid and CHIP, and more.

Kitty Marx, Director, Tribal Affairs Group/Office of External Affairs, CMS
Cyndi Gillaspie, Native American Contact, Region VIII, CMS
Lancaterwilliger, Esq., Center for Medicaid & State Operations
MODERATOR: Jim Roberts, Policy Analyst, Northwest Portland Area Indian Health Board and Portland Area Alternate Tribal Technical Advisory Group Representative

3:15 - 4:45 pm  Columbia A  Workshop
Medicaid and Indian Health Finance
This session examines what is known about the true level of funding from Medicaid for Indian Health programs. It will focus mainly on a better understanding of the importance of Medicaid funding to Indian Health programs and people who use the programs. The session will discuss the level of expenditures by Medicaid for AI/AN IHS users and its variation by State; changes over time; and raise important questions for further research.

Ed Fox, Ph.D., Director, Health and Human Services, Squaxin Island Tribe
Verné Boerner, MS, BA, Co-presenter
Carol Korenbrot, Ph.D., Research Director, California Rural Indian Health Board
MODERATOR: James Crouch, MPH, Executive Director California Rural Indian Health Board; California Area Tribal Technical Advisory Group Representative

3:15 - 4:45 pm  Thornton  Workshop
Overview of the Health Information Technology (HIT) provisions of the Recovery Act
This session will discuss Provider HIT Adoption, Operation Payments, and Implementation Funding. It will also discuss the purpose of HIT adoption and use, what funding is available, who is eligible and what criteria must be met for incentive payments. Will also discuss what the audience should be doing now to get ready.
THURSDAY, SEPTEMBER 17, 2009

3:15 - 4:45 pm Congressional A&B Workshop
Medicare 101 and Meet Your Native American Contact (NAC), Roundtable Discussion
This session will provide an overview of Medicare A, B, C and D for Indian and Tribal Health Program staff and beneficiaries, with the focus on specific provisions for American Indians/Alaska Natives. The session will also address the provider enrollment process and information about how to maximize collections for services provided by tribal programs. The new Medicare contract jurisdictions will be explained and the transition from the current Medicare contractors to the new jurisdictions will be addressed. The second part of the session will address how the CMS NACs work together with States, IHS, and Tribal programs to assure access to CMS programs and maximization of IHS/Tribal third party revenue from Medicare. The CMS Native American Contacts (NACs) from each Regional Office will be available to respond to audience questions or requests.

Nancy Grano, CMS Native American Contact, Region I, Boston
Julie Rand, CMS Native American Contact, Region II, New York
Tamara McCloy, CMS Native American Contact, Region III, Philadelphia
Dianne Thornton, CMS Native American Contact, Region IV, Atlanta
Pamela Carson, CMS Native American Contact, Region V, Chicago
Dorsey Sadongei, CMS Native American Contact, Region VI, Dallas
Nancy Rios, CMS Native American Contact, Region VII, Kansas City
Rosella Norris, CMS Native American Contact, Region IX, San Francisco

THURSDAY, SEPTEMBER 17, 2009

6:30 - 7:30 am Room TBD
Yoga Session
Lita Pepion, CRL Health & Fitness, LLC, Billings, MT

7:00 am-5:00 pm Registration and Information Desk Open

7:00 - 8:30 am Regency Ballroom Foyer
Continental Breakfast Served
Sponsored by: National Indian Health Board

8:00 am Regency Ballroom A
Welcome to Public Health Day!
Jace Killshack, Board Member, National Indian Health Board (Billings Area)

What is Public Health – A Definition
Audrey D. Solimon, MPH, Senior Advisor, Public Health Programs, National Indian Health Board

8:15 - 9:00 am Regency Ballroom A
Protecting Our Nations: Pandemic Influenza Preparation, Response and the Implications for Indian Country
On June 11, 2009 the World Health Organization (WHO) raised the worldwide pandemic alert level to Phase 6 in response to the ongoing global spread of the novel influenza (H1N1) virus. A phase 6 designation indicates a global pandemic is underway. Although current statistics are not yet known specifically for the American Indian & Alaska Native population, the H1N1 flu virus has affected Indian Country with confirmed cases and deaths and it is predicted by the Centers for Disease Control & Prevention (CDC) to continue to worsen with the upcoming fall flu season. The NIH finds it has been working with the Tribes and federal agencies to aid in the preparedness and response efforts for Indian Country. This plenary session will provide recent updates on the outbreak and response & preparedness efforts from federal agencies and will allow Tribal Leaders and community members the opportunity to ask questions for discussion.

An Overview of H1N1
Yvette Roubideaux, MD, MPH, Director, Indian Health Service (IHS)

The Centers for Disease Control & Prevention: Updates and Response in Indian Country
Captain Jay C. Butler, MD, FAAP, FACP, United States Public Health Service, Director, H1N1 Vaccine Task Force, Coordinating Center for Infectious Diseases, Centers for Disease Control & Prevention (CDC)

Critical Infrastructure and Emergency Preparedness
Steve Curren, MS, Deputy Program Manager, Critical Infrastructure Protection Program, Office of Preparedness & Emergency Response Operations, U.S. Department of Health & Human Services

Nitin Natarajan, Program Manager, Critical Infrastructure Protection Program, Office of Preparedness & Emergency Response Operations, U.S. Department of Health & Human Services
The Indian Health Service (IHS) Emergency Services Division Response to the Pandemic Influenza Outbreak
Commander Darrell LaRoche, Director, Emergency Services, Indian Health Service (IHS)
MODERATOR: Isidro Lopez, Vice-Chairman, Tohono O'odham Nation

9:00 - 9:15 AM Regency Ballroom A
Keynote Address
Innovations in Addressing Minority Health Disparities: The National Partnership for Action to End Health Disparities
Garth Graham, MD, MPH, (invited) Deputy Assistant Secretary, Office of Minority Health, U.S. Department of Health & Human Services

The mission of the National Partnership for Action is to mobilize and connect individuals and organizations across the country to create a Nation free of health disparities, with quality health outcomes for all people. The existence of health disparities among minority populations is undisputed. The question that confronts us is: What actions can be taken by private and public partners toward a shared destination: A nation free of health disparities, with quality health outcomes for all.

9:15 - 10:30 am Regency Ballroom A
Tribal Public Health Accreditation (TPHA) Partners
As sovereign nations, tribes are responsible for the overall health and well-being of their members along with the land and environment. Tribes are increasingly involved in the delivery and regulation of public health services, alone or in partnership with other tribes and local, county and state health departments. As a result, the definition of public health in Indian Country is a complex set of services and activities that involve a diverse set of partners and stakeholders that vary by tribe and region. This plenary session focuses on voluntary tribal public health accreditation and how it can support quality improvement in public health. A panel of representatives from national agencies involved in public health accreditation, including the Public Health Accreditation Board, Association of State and Territorial Health Officials and the National Indian Health Board, will discuss the value of voluntary tribal public health accreditation and its potential benefit to Tribes. An update will be provided on progress made by the Tribal Public Health Accreditation Advisory Board and highlight recommendations developed through a year-long strategic planning process.

Jim Pearsol, M.Ed., Chief Program Officer, Association of State and Territorial Health Officials (ASTHO)
William Riley, Ph.D., Board Member, Public Health Accreditation Board (PHAB), Associate Professor & Associate Dean, University of Minnesota School of Public Health

Aleena Hernandez, MPH, Principal and Founder, Red Star Innovations, Technical Lead, Tribal Public Health Accreditation Project & Tribal Public Health Capacity Assessment, National Indian Health Board
MODERATOR: H. Sally Smith, Board Member, National Indian Health Board (Alaska Area)

10:30 - 11:15 am Regency Ballroom
Special Diabetes Program for Indians (SDPI)
In response to the diabetes epidemic among American Indians and Alaska Natives, Congress established the Special Diabetes Program for Indians (SDPI) in 1997. The Special Diabetes Program for Indians is currently a $150 million per year grant program that provides funding for diabetes treatment and prevention services at 399 IHS, Tribal, and Urban Indian health programs in all 127 IHS Areas across the United States. Administered by the IHS Division of Diabetes (DIDP), and with guidance from the Tribal Leaders Diabetes Committee (TLDCC), the Special Diabetes Program for Indians grant programs use proven, evidence-based, and community-driven diabetes treatment and prevention strategies that address each stage of the disease.

Presentation of the Recent Report to Congress & Latest Program Plan: Where We Are Going
Kelly Acton, MD, MPH, Director, Division of Diabetes Treatment & Prevention, Indian Health Service

SDPI Demonstration Projects:
Profile of a Successful Diabetes/SDPI Project
Profile of a Successful SDPI/Healthy Heart Program

11:15 am - 12:00 pm Regency Ballroom
Obesity Prevention
Nearly one-third of America's children are overweight or obese. While the incidence of overweight and obese children is slightly falling in most populations, American Indian and Alaska Native children continue to see increases in the numbers suffering from these conditions. This epidemic puts them at risk for Type 2 diabetes, high blood pressure, asthma, depression and a range of life-long health problems. This panel will examine the problem of obesity and over weight and explore potential solutions.

The Scope of the Problem
Christine C. Ferguson, JD, Executive Director, STOP Obesity Alliance, Faculty, School of Public Health and Health Services, The George Washington University

Where Does Obesity Begin / How Does It End? An Examination of Pre-Natal to Young Adult Influences on Outcomes and Challenges
Ann Bullock, MD, Medical Director, Cherokee Health and Medical Division, Eastern Band of Cherokee Indians

Obesity In Indian Country: Successful Programs and the NIHB Initiative
Stacy A. Bohlen, Executive Director, National Indian Health Board

MODERATOR: Buford Rolin, Vice Chairman, National Indian Health Board (Nashville Area)
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<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<td>12:00 - 12:15 pm</td>
<td>Future Directions of the Special Diabetes Program for Indians (SDPI): The Tribal Perspective, Advocacy, and Strategy</td>
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<td>Buford Rollin, Chairman, Tribal Leaders Diabetes Committee (TLDC), Vice Chairman, National Indian Health Board (Nashville Area)</td>
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<td>12:15 - 1:30 pm</td>
<td>Lunch on Your Own</td>
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<td>12:15 - 1:30 pm</td>
<td>Regency Ballroom A</td>
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<td>CMS Marketing and Research Division is conducting a series of focus groups to gain Tribal insight into effective marketing and communications techniques. Those who have signed up during CMS Day may participate. Attendance is limited to 120 (10 persons from each geographic IHS Area – on a first come-first served basis)</td>
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<td>WORKSHOPS 1</td>
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<td>1:30 - 2:50 pm</td>
<td>Congressional B Workshop</td>
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<td><strong>Tribal Public Health Capacity Assessment</strong></td>
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<td>An accurate understanding of the current capacity of tribal public health entities to prevent disease and promote health is needed to inform policy, quality improvement, and priority setting across Indian Country. The National Indian Health Board (NIHB) received funding from W.K. Kellogg Foundation to conduct a national Tribal Public Health Capacity Assessment to describe the components, activities, competencies and capacities of public health systems in Indian Country. This session includes an overview of the assessment design and how results will help frame tribal public health activities in a national context with local and state health departments, while highlighting key areas unique to tribal settings.</td>
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<td>Aimee Centinyan, MPH, Senior Advisor, Grants Management and Compliance, National Indian Health Board</td>
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<td>Aleena Hernandez, MPH, Principal and Founder, Red Star Innovations, Technical Lead, Tribal Public Health Accreditation Project &amp; Tribal Public Health Capacity Assessment, National Indian Health Board</td>
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<td>1:30 - 2:50 pm</td>
<td>Yellowstone/Everglades Workshop</td>
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<td><strong>Chronic Disease Prevention: Successful Models in Indian Country</strong></td>
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<td>The American Indian/Alaska Native (AI/AN) population continues to suffer from a range of chronic disease conditions. Continued prevalence in AI/AN communities places a demand on health care systems and with limited resources, prevention of these chronic diseases are of great importance. This session will provide information on successful intervention approaches and education approaches for chronic disease prevention efforts for AI/AN people.</td>
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<td>The Zuni Kidney Project, Vallabh (Raj) Shah, MD, Associate Professor, Department of Biochemistry &amp; Molecular Biology, University of New Mexico School of Medicine</td>
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<td>The Tobacco Tipi Project, Merilee Caldwell, Coordinator, Diabetes Grant, Shoshone-Bannock Tribes</td>
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<td>1:30 - 2:50 pm</td>
<td>Bryce Workshop</td>
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<td><strong>The Healthy Indian Country Initiative: Promising Prevention Practices &amp; Resources for American Indian/Alaska Natives</strong></td>
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<td>The current Administration has placed a strong emphasis on primary and secondary prevention efforts, inhibiting the development of the disease before it begins and screening. The prevention of disease involves a wide range of public health professionals, healthcare practitioners (doctors, nurses, community health representatives), programmatic staff, and Tribal support. Currently many promising prevention practices are not being disseminated throughout Indian Country to help with prevention efforts. New and upcoming prevention efforts are also not well disseminated to Tribal communities. This session will highlight current prevention efforts in Indian Country from the Tribal and national level through the Healthy Indian Country Initiative (HICI).</td>
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<td>Shannon White, Injury Prevention Specialist, Sisseton-Wahpeton Oyate Injury Prevention Program, Healthy Indian Country Initiative Tribal Grantee</td>
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<td>The National Tribal Perspective: The HICI Promising Prevention Practices Online Resource Guide</td>
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<td>Sepriceno Locario, MA, HICI Consultant, National Indian Health Board, Healthy Indian Country Initiative National Tribal Organization Grantee</td>
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<td>The National Urban Indian Perspective: Providing Resources to the Urban Indian Community</td>
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<td>Geoffrey Roth, Executive Director, National Council of Urban Indian Health (NCUIH), Healthy Indian Country Initiative National Tribal Organization Grantee</td>
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<td>MODERATOR: Rachel Crawford, Projects Manager, Association of American Indian Physicians, Healthy Indian Country Initiative National Tribal Organization Funding Recipient</td>
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**MODERATOR: Lester Secatero**, Board Member, National Indian Health Board (Albuquerque Area)
1:30 - 2:50 pm  Capitol B  Workshop

**Successful Prevention Approaches to Drug Abuse**

American Indian/Alaska Native communities have been plagued with methamphetamine ("meth") abuse and the negative impact that it has had on suicide rates. Another rapidly rising problem in Indian Country is the abuse of prescription drugs. Approaches to addressing and preventing meth use are in demand by Tribes and Tribes are also seeking help to identify prevention efforts for prescription drug abuse. This session will highlight Methamphetamine and Suicide Prevention strategies in a Native American Community and successful drug abuse prevention strategies specifically for prescription drug abuse with Lamar Associates.

**Successful Practices in Methamphetamine & Suicide Prevention**

Sarah Schmasow, MA, Public Health Educator, Indian Health Service, San Carlos Apache Wellness Center  
Gail Sims, Ph.D., Director, San Carlos Apache Wellness Center

**Prescription Drug Abuse Prevention**

Walter Lamar, President/CEO, Lamar Associates  
Steven K. Juneau, Vice-President/Director, Lamar Associates  
M solder: Margaret Baha-Walker, Board Member, National Indian Health Board (Phoenix Area)

1:30 - 2:50 pm  Bunker Hill  Workshop

**Tribal Epidemiology Centers: Data Sharing and the Implications of Proposed Health Care Reform Legislation**

An update will be given on progress to establish a standardized scalable AI/AN Community Health Profile (CHP) Production Methodology and Data Portal for monitoring and addressing public health concerns that is culturally acceptable. This system is being developed to accommodate a continuum of: measurements; data access levels; population aggregation levels; and communication mediums. The dynamic AI/AN Data Depot web based portal for AI/AN communities and their Tribal Epidemiology Centers to obtain and create AI/AN population health analyses and information displays for monitoring and addressing public health concerns will be described. Details will be given on the vision of how the health information tool makers will constantly be partnering with end users to constantly ask and answer, “what changes are needed to ensure tools can actually help AI/AN communities monitor and address their public health issues?” In addition, you will hear a congressional perspective on efforts to enhance Tribal data collecting capabilities on an inter-governmental basis.

By the end of the session participants will be able to:
1) Describe health information tools to display data and impact the health of their community.  
2) Define ways that they can provide feedback to improve these tools.  
3) Define areas of interest where participants might engage their community in improving or tailoring these tools.  
4) Be more knowledgeable about efforts on Capitol Hill to create ease in data collection between Tribes and governmental entities.

Captain John Mosely Hayes, Dr.PH, U.S. Public Health Service, Senior Epidemiologist, Tribal Epidemiology Center, United South and Eastern Tribes, Inc.

Lt. Commander Dwayne Jarman, DVM, MPH, U.S. Public Health Service, Prevention Specialist, Health Promotion Disease Prevention Program, Indian Health Service  
Maile Tualii, Ph.D., Associate Director, Urban Indian Health Institute  
Elana Leventhal, Legislative Assistant for Congressman Frank Pallone, Jr. (D-NJ)  
MODERATOR: Thomas John, Treasurer, National Indian Health Board (Oklahoma Area)

1:30 - 2:50 pm  Yosemite  Workshop

**Recruitment & Retention of AI/AN Students in the Field of Public Health: Creating a Pathway for Caregivers in Public Health**

The NIH recognizes the significance of creating a pathway for AI/AN student access to careers in the health field. In an effort to provide a venue for AI/AN students access to opportunities in public health internships, the NIH has partnered with the Morehouse School of Medicine's Public Health Summer Fellows Program to provide exposure to public health via the Centers for Disease Control & Prevention (CDC) research staff.

**Early Exposure of AI/AN Students to Public Health Research, Service & Education: A Model for Achieving Health Equity & Quality Healthcare in Underrepresented Populations**

Clementine Rasheed, M.Ed., Director, Public Health Summer Fellows Program, Faculty, Department of Community Health & Preventive Medicine, Morehouse School of Medicine  
2009 Public Health Student Fellows, Morehouse School of Medicine:  
1. Beth Bahe, University of Arizona  
2. Amanda Harris, University of New Mexico  
3. Socorro Herrera, Southern Utah University  
Captain Pelagic "Mike" Snesrud, Senior Tribal Liaison for Policy & Evaluation, Office of the Director/Office of the Chief of Public Health, Office of Minority Health & Health Disparities, Centers for Disease Control & Prevention  
MODERATOR: Audrey D. Solinson, MPH, Senior Advisor, Public Health Programs, National Indian Health Board

1:30 - 2:50 pm  Capitol A  Workshop

**Recruitment & Retention of AI/AN Students in Medicine and Public Health: New Initiatives, Opportunities and Promise**

The NIH is also in the process of partnering with the University of Minnesota to increase the number of AI/AN students into schools of public health and provides continued support to the Association of American Indian Physician's (AAIP) in their efforts to increase the number of AI/AN physicians throughout Indian Country via internships, fellowships, and other opportunities.

The Association of American Indian Physicians Current Initiatives for the Recruitment & Retention of AI/AN Students  
Joseph J. Jacobs, MD, MBA, Associate Medical Director, Abbott Molecular, Association of American Indian Physicians (AAIP)  
University of Minnesota & the NIH Collaboration to Increase the Number of AI/AN Students in Schools of Public Health
helps government leaders make the connection between their policy priorities and decisions and the health of their constituents—and we support them in their efforts to create healthier communities by developing tools and materials that educate and engage diverse policy-makers, and by facilitating cooperation between leaders at all levels of government.

Laura Ojeda, MPH, Deputy Director, Leadership for Healthy Communities, Robert Wood Johnson Foundation (RWJF)

3:20 – 3:30 pm  Regency Ballroom A
Closing Remarks
Reno Keoni Franklin, Chairman, National Indian Health Board (California Area)

Retiring of the Colors
Closing Prayer
AWARD WINNERS 2005-08

2008

JAKE WHITE CROW AWARD
Honorable Byron L. Dorgan For a lifetime of achievement and personal sacrifice toward the advancement of health care of all American Indians and Alaska Natives.
Carole Anne Heart For a lifetime of achievement and personal sacrifice toward the advancement of health care of all American Indians and Alaska Natives.

NATIONAL IMPACT AWARD
Julia Davis-Wheeler, Nez Perce Tribe Executive Committee, Nimiipuu Health Board
Dan Kashevaroff, Alaska Native Tribal Health Consortium
National Native CBA Network, National Native American AIDS Prevention Center, Commitment to Action for 7th Generation Awareness and Education, HIV/AIDS Prevention Project, and Intertribal Council of Arizona
Ronnie Tepp, Juvenile Diabetes Research Foundation
Lorraine Valdez, Indian Health Service, Division of Diabetes Treatment and Prevention
Alaska Native Tribal Health Consortium

REGIONAL IMPACT AWARD
Ernest C. Bectenti Jr., Gallup Indian Medical Center Steering Committee
Tina Bullock, Nimiipuu Health Clinic, Nez Perce Tribe
Dr. Franklin R. Freeland, Fort Defiance Indian Hospital
Joe Garnie, Native Village of Brevig Mission
Linwood Killam, Riverside/San Bernardino Indian Health Program
Red Talon STD/HIV Coalition, Northwest Portland Indian Health Board
Carol Treat, Alaska Native Medical Center-Diabetes Program
Judy Thompson, Alaska Native Medical Center-Diabetes Program
CMRD Tracy Williams, Fallon Tribe Health Clinic
Healthy Heart Program, Toiyabe Indian Health Project, Inc.
Samantha Maloney, Alaska Native Medical Center
Stella Washines, Northwest Tribal Comprehensive Cancer Coalition

LOCAL IMPACT AWARD
Belinda C. Aungie, Cheyenne River Sioux Tribe, Health Department Education Program
Bret R. Benally Thompson, M.D., Providence Alaska Medical Center, Alaska Native Medical Center
Angela Broncheau, Nimiipuu Health Clinic, Nez Perce Tribe
Freda HeavyRunner, Blackfeet Community Hospital
Archie Hendricks Sr., Tlaho O’odham Nursing Care Authority
Kendra Lone Elk, Indian Health Service, Pine Ridge Service Unit
Margie Mejia, Lytton Band of Pomo Indians Rancheria
Gloria Zuniga, Association of American Indian Physicians, Oklahoma
Helen Maldonado, Area Diabetes Consultant, IIHS
Teresa A. Monger, Oklahoma Area Indian Health Service, Pawnee Service Unit
Jerome J. Simone, United Indian Health Services, Inc.
Calvin Two-Guns, Liberty Research Group
Bronson White, DO, Indian Health Service-Jicarilla Service Unit
Pink Party Team, Okmulgee Indian Health Center, Muscogee (Creek) Nation Health System
Board of Directors, Winslow Indian Health Care Center
Deborah Deborah, Alaska Native Medical Center
Karen Fryberg, Tulalip Health Clinic

YOUTH IMPACT AWARD
Kayla Carpenter, Salmon Run Relay, Yurok
Erica Chase, Salmon Run Relay, Hoopa

2007

JAKE WHITE CROW AWARD
Rachel Joseph, National Steering Committee
Buford Rolin, Tribal Leaders Diabetes Committee

NATIONAL IMPACT AWARD
Juliet Pitman, SENSE, Inc.
Jim Roberts, Tribal Technical Advisory Group
George Gilson, MD, Alaska Native Medical Center
Awakening the Spirit Team, American Diabetes Association
Bruce Lesley, First Focus
Valerie Davidson, Alaska Native Medical Center

REGIONAL IMPACT AWARD
Pine Hill Health Center, Ramah Navajo School Board, Inc.
Judy Thompson, Alaska Area Diabetes Pharmacist
Riverside San Bernadine County Indian Health Diabetes Team
Sharon John, Yakima Healthy Start Program
Donald Clark, Albuquerque Area Indian Health Board
Cecile Greenway, Lower Elwha Klallam Tribal Clinic
Whitney Jones, Squaxin Indian Tribe
Rocky Boy Health Board SDPI, Rocky Boy Clinic
Joseph Engleken, Tuba City Regional Health Corp
Heather Mercer, Riverside Indian Health
Molin Malicay, Sonoma County Indian Health Project
Neil Murphy, MD, Chief Clinical Consultant

LOCAL IMPACT AWARD
Rita King, Sleeping Ute Diabetes
Steve Kurz, Cowitz Indian Tribal Clinic
Linda Foley, Cowitz Tribe Health Board
Kimberly Woodhull, Alaska Native Medical Center
Mediset Program, Alaska Native Medical Center
Rex Quaempts, Yakima Healthy Heart
Darlene Lynch, San Bernadino County Indian Health, Inc
Deborah Nyquist, Kanaitze Indian Tribe
Rose Algea, Squaxin Island Tribe
Joyce Bachman, White Cloud Health Station
Mary Corcoran, Rocky Boy Clinic
Jim Sernill, Cowlitz Tribe
Arlene Long, White Cloud Health Station
Margaret Baldwin, Alaska Native Medical Center
Denise Mondragon, Taos Pueblo Community
Judy Lujan, Taos Pueblo
Hualapai Healthy Heart Program, Hualapai 19 Health Dept.
Pilar Pettiford, Sycuan Medical Dental Center
Francia Corpuzm, Sycuan Medical Dental Center

YOUTH LEADERSHIP AWARD
Cinda Hughes, National Congress of American Indians

2006

JAKE WHITE CROW AWARD
Mickey Peercy, Choctaw Nation of Oklahoma

NATIONAL IMPACT AWARD
Anslem Roanhorse, Jr., Navajo Nation Division of Health
Kathy Hughes, Vice Chairwoman, Oneida Tribe
James E. Berner, MD, Alaska Native Tribal Health Consortium
Rosalyn Singleton, MD, MPH, Alaska Native Tribal Health Consortium
Rachel Joseph, Lone Pine Paiute Shoshone
Kelly Acton, MD, MPH, Indian Health Service

REGIONAL IMPACT AWARD
Centers for Medicare & Medicaid Services
Regional Native American Contacts:
• Irv Rich, CMS Region I – Boston
• Julie Rand, CMS Region II – New York
• Tamara McClary, CMS Region III – Philadelphia
• Diane P. Thornton, CMS Region IV – Atlanta
• Pam Carson, CMS Region V – Chicago
• Dorsey Sadongei, CMS Region VI – Dallas
• Nancy Rios, CMS Region VII – Kansas City
• Cynthia Gillaspie, CMS Region VIII – Denver
• Rosella Norris, CMS Region IX – San Francisco
• Ernie Kimball, CMS Region X – Seattle
Charlene Red Thunder, Indian Health Service, Benidji Area
Phil Norrgard, Fond du Lac Reservation Human Services Division
Maria Lucy Harrison, Detroit American Indian Health Center
Robbin Williams, Oklahoma City Area Inter-Tribal Health Center
Bobbi Metzger, Oklahoma City Area Inter-Tribal Health Center
Harold W. Schneider, Jr., MD, Alaska Native Medical Center
Julien Naylor, MD, MPH, Alaska Native Medical Center
Captain Ann Marie Mayer, Alaska Native Medical Center
Captain Mary M. Leemhuis, Alaska Native Medical Center
Iris L. Gray, Alaska Native Medical Center
Laura Manuel, Tulare River Tribal Clinic, Inc.

LOCAL IMPACT AWARD
Luella Morgan, Red Lake Comprehensive Health Service
Captain Gary M. Givens, Alaska Native Medical Center
Jim Roberts, Northwest Portland Area Indian Health Board
Sherry Frazier, Alaska Native Medical Center
Richard Brodsky, MD, Alaska Native Medical Center
Cassandra L. Williams, Alaska Native Medical Center

2005

JAKE WHITE CROW AWARD
Dr. Kathleen Annette, IHS – Bemidji Area

NATIONAL IMPACT AWARD
Doug Black, IHS Headquarters
Dorothy Dupree, Centers for Medicare & Medicaid Services
Valerie Davidson & Frank Dayish Jr., Tribal Technical Advisory Group (CMS)
White Mountain Apache Tribal Council

REGIONAL IMPACT AWARD
David Head, Norton Sound Health Corporation
Emily Hughes, Norton Sound Health Corporation
John Kokesh, Alaska Native Medical Center
John Lewis & Alberta Tippeconnic, Inter Tribal Council of Arizona
Arlan Melendez, Reno-Sparks Indian Colony
Wendy Montemayor, Oklahoma City Area IHS
Elmer Nicholson, Jr., Alaska Native Medical Center, Oklahoma City Area Inter-Tribal Health Board Dental Support Center
Jerry Pardilla, Katahdin Consulting
Frank Sacco, Alaska Native Medical Center
David Templin, Alaska Native Medical Center
Julie Ysaguirre, Arizona Health Care Cost Containment System

LOCAL IMPACT AWARD
Jody Abe, Elko Band Council
Cassandra Allen, Ak-Chin Indian Community
Michael Allison, Arizona Department of Health Services
Sandra Beauchamp, Native American Health Center. Family & Child Guidance Clinic
Doris Burns, Colorado River Indian Tribe
Tahnee Camacho, Native American Health Center. Family and Child Guidance Clinic
Choctaw Nation CARES Project
Lewis Hill, Minne-Tope Health Center
Nelson Jim, Native American Health Center. Family & Child Guidance Clinic
Kathy Johnson, Norton Sound Health Corporation
Charlene Jones, Mashantucket Pequot Tribal Nation
Mark Kelso, Norton Sound Health Corporation
Janet King, Native American Health Center. Family & Child Guidance Clinic
Cecil Means II, Aberdeen Area IHS
Prevention Research Center Staff, University of New Mexico
Karen Saylor, Native American Health Center. Family and Child Guidance Clinic
Judith Skena, Oneida Community Health Center
Kevin Stange, Alaska Native Medical Center
Sandra Twaddle, Choctaw Nation CARES Project
Berda Wilson, Norton Sound Health Corporation
The United States Health & Housing Foundation ("The Foundation") was organized in the late 1980's and is committed to engage in civic and charitable activities and the business of establishing, operating and maintaining nursing homes and related health care services and facilities, and low income housing facilities, and retirement housing facilities for the elderly.

The Foundation has conducted its own research, verifying that nursing home long-term care services are not available in a meaningful, convenient, or professional manner to the approximately 585 Recognized American Indian Nations (the "Nations") in the United States. The Foundation has elected to pursue a plan of action to determine if it can directly assist the Nations in developing, financing, and implementing assisted living and nursing home facilities on sites inside the Nations and convenient to its potential residents and their families. The Foundation is aware of the important historical tradition of American Indian families directly caring for their elderly and infirm in a loving environment. Our Foundation goal is to help the Nations identify plans whereby the Nations can build assisted living and nursing home facilities on Nation's lands, fully eligible to receive timely reimbursement from Medicaid, Medicare, Federal Department of the Interior, and other public need-based sources.

In addition, The Foundation is in the position to assist the Nations with the development of economic vertically integrated industries associated with long-term care. These industries would be owned and operated by the Nations and would provide direct education, training and quality job placement of Nation members by providing the means to raise the Nation's individual member's standard of living and economic mobility through permanent well-paying jobs with potential for real advancement. These related industries include nursing schools, pharmacy operations, medical supply companies, medical computer hardware and software companies, food/beverage operations, staffing agencies and others.

Once a proven, positive, and workable plan of action for the construction, staffing and operation of long-term care facilities exists, the Foundation is confident this plan could be replicated by the Nations for all their members.

The Foundation would like the opportunity of discussing these points and working with you in this endeavor. We understand this is a large, multi-faceted, complicated project, but one The Foundation is fully ready to help with. The Foundation consists of individuals with decades of experience and expertise in health care development and financing. We look forward to helping you.

Presented by: United States Health & Housing Foundation, Inc.
711 Twenty-ninth Street South, Birmingham, Alabama, USA 35233
877-498-7677 • 205-250-7677 • Facsimile: 205-328-6303 • americanindian@ushhf.org
ABOUT THE ARTIST

ROGER B. THOMPSON - SENeca NATION

Mr. Thompson is our featured artist this year, with CREATION
as our cover and conference bag art

The Cattaraugus Indian Territory - Gowanda (Seneca Nation) is the home of Roger B. Thompson who is from the Turtle Clan (mother) and born for the Heron Clan (Father). He graduated from Woodstock Union High School in 1981 and later had the opportunity to attend Philadelphia College of Art graduating with a Bachelors of Arts in Illustration in 1985.

As a young boy, his greatest influence on doing artwork came from his father. "My father had three large notebooks full of etchings, and when I was young I would look at the things he drew." A long time ago his father was involved in the council government, but Roger lost his father when a drunk driver caused an accident.

Thompson was born in March 1962 and loved going out into the woods of Cattaraugus Creek. "Art helped me find peace and made me feel good. It was an escape for me from everything else and became something I enjoyed. I liked it so much I started getting in trouble in school for drawing in class."

Thompson credits his childhood as being an important period in his life. While other kids were making airplanes, he was making his three dimensional airplanes. He was making sure to cut out wings and fold it so that his airplane replicated what an airplane actually looked like. As he grew older, one day an art teacher from school pulled him aside and took him into a classroom. The teacher told him to look around the room and then took him out and asked him to draw what he had seen. The teacher looked at the image and told Roger that he had a photographic memory.

Roger thinks his skills evolved as he was growing up. Picturing things clearly in large part came because of his culture. "Being Indian you appreciate nature and tune in with everything going on around you," said Thompson. He loved seeing the things that were out there in nature.

Today Roger loves working with young people and does presentations with kids on illustration. "Kids see things that grownups don't. Kids have open minds and see things in a different way, they still have an imagination. Kids have an ability to picture things, I think as you grow up you forget to do that. I think in school you are trained in another way of seeing things...you lose your imagination," said Thompson.

Thompson has worked most of his life with two-dimensional artwork, but has the ability to work with an array of mediums such as acrylic, watercolor, wood burning, charcoal, pen and ink, glass, stain glass, a little bit of carving. He currently is a free lance artist. Over the past seven years he has completed wood burning artwork on over 200 wooden TV tray tables. "My father gave me a wood burning tool a long time ago and I decided to try this new media. It started with my mom asking me to do a gift for someone, and now people will bring their orders for wood tray tables."

This year's drawing featured on the program cover is inspired by the Creation story of the Seneca people. This is the way he heard it told to him. "There was an upper world and below that the world was filled with water. The Upper Sky Woman was pushed through an opening to the lower world and fell toward the water. Several birds caught her and carried her. The turtle saw the bird taking this responsibility and offered to carry her temporarily on his back. Muskrat and Beaver took part in helping and brought mud from below the water which made the turtle become permanently affixed and provided her a place to dwell...that became Turtle Island which is this American Continent," said Thompson. There are different versions of the story, but this is the basic influence of the artwork he has produced for this year's National Indian Health Board Annual Consumer Conference.

Thompson hopes that people will continue to encourage Native young people to do artwork. "When I grew up there was a Fall Festival where a lot of our artists would showcase their work. I enjoyed going to it, these types of activities that are good. Young people can take interest in it and tend to forget about the other influences. Instead of getting into trouble with the law, or drugs and alcohol, our young people can get influenceed by our culture," said Roger. NIHB appreciates Roger for sharing his artwork as the basis for this year's Annual Consumer Conference!

If you would like to contact Roger Thompson about his artwork, please contact him at:

Roger Thompson, 1628 Bush Road, Gowanda, NY 14070
Call: (716) 913-9826  Email: jane@hewi@yahoo.com
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**Aberdeen Area Representative**

**Mr. Robert Moore**, an enrolled member of the Rosebud Sioux Tribe of South Dakota, is an elected Council member of the Tribe. Mr. Moore serves on the Health, Government Affairs (chair) and Budget and Finance (vice chair) committees for the Tribe. He is also the Great Plains Alternate Area Vice President of the National Congress of American Indians, and the Aberdeen Area representative to the Tribal Technical Advisory Group of the Centers for Medicare and Medicaid Services. Mr. Moore has been a leader for the Great Plains tribes working to secure recent passage of the Indian Health Care Improvement Act in the US Senate advocating for tribal citizens, promoting tribal sovereignty and securing treaty obligations for health care. Working almost exclusively in federal tribal relations for 20 years, including serving as the Indian Affairs staff member for former US Senator Tom Daschle, his work has raised the awareness of health disparities throughout all of Indian Country. He has also worked extensively in and is a strong advocate for American Indian Higher Education as a former employee and graduate of Sinte Gleska University of Rosebud. He makes his home in Antelope, South Dakota at the heart of the Rosebud Sioux Indian Reservation where he is the primary care-giver for his elder parents.

**Alaska Area Representative**

**Ms. H. Sally Smith** served as the Chairperson for the National Indian Health Board’s (NIHB) Board of Directors from December 1999 until January 2009. Currently Ms. Smith is the Alaska Area Representative to the NIHB Board and also serves as NIHB’s Representative to the Tribal Technical Advisory Group (TTAG). 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. She is Yupik Eskimo and the mother of four sons.

**Albuquerque Area Representative**

**Mr. Lester Secatero** (To’i’i Tajilee – Canoncito Navajo) Mr. Secatero is currently the Chairman of the Albuquerque Area Indian Health Board, Inc. and a member of the Executive Committee of the National Indian Health Board. He has been the Pastor of The Jesus Church at To’i’i Tajilee for the past twenty five years. Mr. Secatero has served the To’i’i Tajilee Chapter in a number of different capacities. Mr. Secatero has served on the Albuquerque Area Indian Health Board for the past five years and was elected Chairman in 2004. He has been married to his wife for over thirty five years and is a father and grandfather.

**Bemidji Area Representative**

**Ms. Cathy A. Johnson** is a citizen of the Sault Ste. Marie Chippewa Indians located in Sault Ste. Marie, Michigan and represents the Bemidji Area Tribes (Michigan, Wisconsin and Minnesota) on the National Indian Health Board. She has a Bachelor of Science degree in Business Administration, and was elected to the Sault Ste. Marie Tribes Board of Directors in 1996 representing Unit 1. She has been serving as a board member since that time, and re-elected for a fourth term in the summer of 2008; she presently serves as Treasurer. Cathy’s Spirit Name is Wabanung Quay. She is a member of the Wolf clan. She resides in Sault Ste. Marie, Michigan – Bawehating. Cathy is actively involved with United Tribes of Michigan and the Midwest Alliance of Sovereign Tribes (MAST). She also serves on the Tribes traditional living and foods program planning committee, and participates in the Sault Ste. Marie culture committee, higher education committee, conservation committee, and has served as an advisor for the Sault Ste. Marie Chippewa Tribal Youth Council. Cathy states, “The greatest gift that the creator has given me is my family. I have been married for 30 years to Tony Abramson and we have 3 beautiful children Lisa, Laura and Tony, Jr. We have 6 beautiful granddaughters and another grand-baby on the way who are the absolute joys of my life.” Cathy loves to hunt, fish and gather the indigenous foods of her area, and enjoys camping, hiking, traveling and family gatherings.

**Billings Representative (Montana/Wyoming Area)**

**Mr. L. Jace Killiback**, “Yukana’e Nesoohee” (Streaming Eagle) is a Northern Cheyenne Indian from Busby, Montana and is a direct descendant of Chief Dull Knife. Mr. Killiback is currently serving his second term as a Councilman for the Northern Cheyenne Tribe and is the Billings Area Representative for the NIHB Board of Directors. In 2002 L. Jace received his Bachelors of Arts Degree from the University of California, Berkeley in Native American Studies with a minor in Environmental Science. While pursuing his higher education in the Bay Area, L. Jace Killiback 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, Mr. Killiback 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. Killiback was the former ‘Treasurer of the CLLBT and the past chairman of the MT/WY-TLC and is current chairman of the Subcommittee on Health. Mr. Killiback has facilitated Tribal Consultations with SAMHSA, made presentations on suicide prevention, and testified at a senate field hearing on Indian health care. Mr. Killiback has served as the Billings Area Representative for the Direct Service Tribes Advisory Committee, IHS HIP/DIP Policy Advisory Committee, and Tribal Consultation Advisory Committee for the Center for Disease Control and Prevention.

**California Area Representative - Chairman**

**Mr. Reno Keoni Franklin** is an enrolled member of the Kashia Band of Pomo Indians. His family comes from the villages of Du Kasal and Aca Sine Cawal Li. He was raised in a traditional Kashaya Family and was taught his culture, language and traditions from his elder family members and other respected Kashia Pomo tribal elders. The son of Dino Walter Franklin (Kashia Pomo) and Pearl Ann Kuulani Makauiwi (Molokai Hawaiian), Mr. Franklin was born into a multi cultural
family and taught to respect other cultures and religions. Mr. Franklin has years of experience in the emergency medical field, working as a Fire Fighter/Emergency Medical Technician in Indian Country. Mr. Franklin has served his tribe for the last eight years as an elected Health Delegate. He serves as an alternate to the Facilities Appropriations Advisory Board, a primary on the CDC TCAC, Board Member of the Friendship House of San Francisco, primary on the Health Research Advisory Committee and primary on the IHS CA Area Office CATAC. He comes from the Sonoma County Indian Health Project, a Tribal Health Clinic in Northern California, where he has served on the Board of Directors for 8 years and is currently serving his third term as the Chairman of the California Rural Indian Health Board. Years of travel throughout Indian Country have given him a high regard for all Tribes and Tribal Cultures and opened his eyes to the unique health needs in each region of Indian country. Mr. Franklin currently serves as the Chairman of the National Indian Health Board.

Nashville Area Representative
Mr. Buford L. Rollin is a member of the Poarch Band of Creek Indians. He has served as Secretary for the Tribe and has served as the Vice-Chairman from 1991-2006. As of June 12, 2006 he was elected Chairman of the Tribe. In 1989, Mr. Rollin received a service award from the Indian Health Service for improving the Health of Indian People. In 1993, he 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. Rollin has served on many national organizations including the National Congress of American Indians (NCAI), the Armore Area Partnership for Youth Board of Directors, and the Florida Governor’s Council on Indian Affairs. He has held various positions pertaining the North West Florida Creek Indian Council, the National Committee on Indian Work, the Episcopal Church, The Chamber of Commerce Board of Directors, Creek Indians Arts Council, Creek Indian Heritage Memorial Association, and the United South & Eastern Tribes (USET) and currently as Vice-Chairman for the National Indian Health Board (NIHB). He serves on the State of Alabama Public Health Advisory Board and is a member of the USET Health Committee. Mr. Rollin was appointed in 1997 by Dr. Michael Trujillo, Director, Indian Health Service, as Tribal Co-Chair National Steering Committee (NSC), for Reauthorization of the Indian Health Care Improvement Act (IHCIA). He was appointed in 1999 Tribal Co-Chair to the ‘Tribal Leaders Diabetes Committee’ by Dr. Michael Trujillo. During 2000, Mr. Rollin was appointed to the White House Commission on Complimentary and Alternative Medicine Policy by President Bill Clinton. Mr. Rollin was appointed to NCAI Tribal Leaders Health Information Technology Task Force in 2001, by NCAI President ‘I. E’ Hall. Mr. Rollin was elected Chairman. Mr. Rollin was the Co-Chair for the Healing Our Spirit Worldwide Planning Committee. The last meeting was held in August 2006 in Edmonton Alberta, Canada. Mr. Rollin is the Co-Chair of the Tribal Leaders Diabetes Committee as well as a member of the IHS Strategic Planning Committee. Mr. Rollin is currently the Vice Chairman of the National Indian Health Board.

Navajo Area Representative
Mr. Jerry Freddie serves as the Navajo Nation and Area Representative to the National Indian Health Board. He currently serves as a Councilman to the Navajo Nation. Mr. Freddie, a member of the Navajo Nation and Council Delegate, was born and raised in Arizona. After graduating from Holbrook High School he attended Arizona Western College and Northern Arizona University, graduating with a B.A. in Elementary Education with an emphasis on Special Education. Mr. Freddie worked in the B.I.A. schools system for 19 years before becoming the Project Coordinator for the National Head Start Demonstration Project for 7 years. Over the years, Mr. Freddie has represented the Navajo Nation and his local community on several boards as well as serving as a Chapter Vice-President, Chapter President and Chairman of Land Commission (Dillon Chapter) and serving on the Governor’s Advisory Committee on Health Issues for Arizona. He has served 4 consecutive terms (16 years) on the Navajo Nation Council, serving as the Chairman of the Health & Social Service Committee and the Intergovernmental Relations Committee. Currently, Mr. Freddie serves on the IHS Budget Formulation team, the Tribal Consultation Advisory Committee to the Centers for Disease Control & Prevention, the Tribal Leaders Diabetes Committee, and as a consultant for Parental Involvement to the Navajo Nation Schools.

Oklahoma Area Representative – Treasurer
Mr. Thomas (Tom) John obtained a Bachelor of Science degree in Public Relations from Syracuse University in May 1990. He received a graduate Certificate in Public Health from the University of Oklahoma, Health Sciences Center, and College of Public Health in May 2006, and is currently enrolled in the master of public health program at the University of Oklahoma. He has worked with American Indian tribes for his entire professional career, including positions in the areas of tribal administration, law enforcement, health, gaming and parks & recreation. His experience working with American Indian tribes has been at the local, regional and national levels. During this time, Mr. John has been responsible for many multi-million dollar programs, and has had overall supervisory responsibility for as many as 145 staff. He worked with tribal health programs in particular for over thirteen years, including positions for both individual tribes and a tribal consortium. Eight years were specifically related to management of tribal diabetes programs. Other responsibilities have included personnel management, policy & procedure development; grant writing, development of educational & public information materials, program planning & evaluation, and overall organizational administration & fiscal management. Additionally, Mr. John has been entrusted to represent numerous American Indian tribes on regional and national level policy issues with the federal government. He has been involved with the technical development of a variety of federal Indian health policies, including analysis of federal legislation, consultation between Indian tribes and the federal government, health disparities and funding allocation methodologies. Mr. John has also sat on several local, regional and national committees, workgroups and boards relative to American Indian health. Mr. John is an enrolled member of the Seneca Nation of Indians, and was raised on his tribe’s Allegany Territory in New York State. He belongs to the turtle clan, and is also a member to their traditional longhouse. Mr. John is married to Lisa of the Chickasaw Nation, and they have two children, Lauren and Trevor.

Phoenix Area Representative
Margaret Baha-Walker, Vice Chairwoman of White Mountain Apache Tribe, was born and raised in the small community of Seven Mile in Whiteriver, Arizona. She is of the Eagle Clan (Iya’aye = the Mesquite People Clan) and born for the Mexican People Clan. She is married to Lowell Walker, and together they have 3 sons. They are also proud grandparents and traditional Godparents of five young Apache women. Vice-Chairwoman Baha-Walker won a historic election in 2006, allowing her to serve as the very first Vice Chairwoman for the White Mountain Apache Tribe. Prior to serving as Vice Chairwoman, Margaret Baha-Walker served her people for more than thirteen years on the Tribal Council. Balancing a strong spiritual life along with a compassion for serving her people, Margaret Baha-Walker has been a strong voice at the local, state and national level on health issues. Vice-Chairwoman Baha-Walker continues to be an advocate representing not only the White Mountain Apache Tribe but many tribes as the Phoenix Area Representative on the Board of the National Indian Health Board and is a strong supporter of the NIHB. In addition to
her strong commitment to addressing health and social issues in Indian country, Vice Chairwoman Baha-Walker is a strong advocate on gaming issues, infrastructure development on reservations and remains dedicated to working with tribal youth. The Vice Chairwoman continuously sponsors youth camps, traditional camps and works with other Tribal Leaders in Arizona to cooperatively address issues through the Inter-Tribal Council of Arizona and the Arizona Indian Gaming Association. Vice Chairwoman believes she and her people of the White Mountain Apache Tribe are rich in history, culture and language and contributes her commitment and dedication to her people to her traditional upbringing and values.

**Portland Area Representative**

Mr. Andy Joseph, Jr. started his 4th term on the Confederated Tribes Business Council in July 2009. He is a Nespelem District Representative, where in 1997 he was elected to the Nespelem School Board. Mr. Joseph serves on his Council's Executive Committee, Veterans Committee as 1st Vice, Tribal Government Committee as 1st Vice, Culture Committee as 1st Vice and 1st Vice for the Education and Employment Committee. He is also the Chairman of the Health & Human Services Committee and serves as the Tribe's Delegate to the Northwest Portland Area Indian Health Board (NAIHB) where he is the now the Chair. As Chair of NPAIHB, Andy represents the Portland Area on the Board of the National Indian Health Board (NIHB), where he was recently elected as Member-At-Large and Executive Committee. In addition, Andy represents NIHB on the SAMHSA Advisory Committee. Andy is also a voting delegate of ATNI, NCAL and serves as the Vice Chairman of the IHS Direct Services Tribes Advisory Committee.

“Hello, I was born in Portland OR on September 23, 1959. When my parents were relocated during the Relocation Act, I moved home to the Colville Reservation in the spring of 1968. In 1970, my Father ran for Tribal Council - with my Grand Aunt Lucy Covington. Also, in 1970 our Tribe won the battle against Termination of our Reservation. From 1977-79 I served in the US Army 2nd of the 73rd Airborne Ranger Battalion. I have been happily married to Lori Lynn since December 18, 1983 and we have 5 children and 3 grandchildren. In 1997, I was elected to the Nespelem School Board. I come from the blood of many Chiefs and have been mentored by my Father who served on the Tribal Council for 17 years; my mother and her parents, Gorge and Celestine Friedlander. Gorge served on Tribal Council, as well as his sister, Lucy Covington. As a youth I listened to other Tribal leaders; Mel Tonasket and Shirley Palmer. While on the Portland Area Indian Health Board I have been mentored by Pearl Capoeman-Baller, Bob Brisbois, Willy Jones, Linda Holt, Janice Clements and Bernice Mitchell.”

**Tucson Area Representative - Secretary**

Ms. 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 (TOLO). 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.

**NIHB Staff**

**Stacy A. Bohlen** (Sault Sainte Marie Tribe of Chippewa Indians) is the Executive Director of National Indian Health Board and serves the Board as an advisor. A 21-year veteran, policy professional in Washington, DC, since 2005 she has also served NIHB in the roles of Acting Executive Director, Deputy Director and Legislative Director. Ms. Bohlen received her Bachelor's degree in Political Science from Oakland University in Rochester Hills, MI and is near completion of her Master's in Government, ABT from Johns Hopkins University, Baltimore MD. Prior to her service to NIHB, Ms. Bohlen was the Director of Federal Relations for the American Indian Higher Education Consortium, Deputy Director of the American Osteopathic Association's Washington, DC Office, and served on the staff of former U.S. Congressman Bob Tracker. Ms. Bohlen was born and raised in Michigan and is an enrolled member of the Sault Sainte Marie Tribe of Chippewa Indians.

**Mary Wissomette Richards, MBA,** has extensive experience with both for-profit and non-profit organizations in the areas of healthcare, family services in foster care and adoption of special needs children, technology start-ups, and manufacturing. She has consulted with Fortune 500 companies, and most recently served in Treasury management for a $2.4 billion advertising/media company. She began her career as a City Treasurer, and has worked in public school finance. She volunteered with the National Indian Health Board in 2007, and assisted in a financial and internal control assessment of the organization. That is when her passion was ignited; the health disparities of American Indian/Alaska Natives have become a personal challenge to help others in understanding these inequities. As Deputy Director of NIHB, she will continue to join others in the mission to improve their healthcare and improve lives. She is married to Thomas, a former public school teacher, and has three children, daughters Laura and Sarah and a son, Mark.

**Aiimce Centuveny, MPH,** serves as the Senior Advisor for Grants Management & Compliance at the National Indian Health Board (NIHB) and has worked closely with the Tribal Public Health Accreditation Project during the last year. With 15 years experience in maternal-child health, nutrition and reproductive health, Aimees possesses strong skills in program design, management and technical training, all of which complement her clinical skills as a midwife. She has provided technical leadership and strategic planning guidance to reproductive health, maternal-child health and HIV programs in the United States, Africa and Southeast Asia. Aimee received her Master of Public Health degree from Tulane University in International Health and Development and is fluent in French.

**Audrey D. Solimon, MPH,** (Pueblo of Laguna) is the Senior Advisor for Public Health Programs and works on the NIHB-Centers for Disease Control & Prevention Cooperative Agreement as the Principal Investigator. Ms. Solimon graduated from the University of New Mexico (UNM) with Honors with a Bachelor of Science in Psychology and a minor in Biology (2001) and in 2006 she received her Master in Public Health degree from the UNM Department of Family & Community Medicine. Her experience and research history includes behavioral health topics related to alcohol use and abuse among minority populations, community-based participatory research (CBPR) in Tribal communities, and other topics including obesity prevention, teen pregnancy issues, historical trauma and adolescent mental health topics.

**Bryce Roth** (Lakota Sioux, Fort Yates North Dakota) is the summer intern of the National Indian Health Board. Bryce is going into his senior year at The University of Oregon, and will be graduating in the
summer with a Bachelor of Science in Political Science with a minor in Business Administration. Bryce has served as NIHBI's intern for two summers and in the past has worked with other Native American organizations pertaining to healthcare and education. Bryce is originally from Portland Oregon. While attending Oregon City High School from 2002-2006 he founded two organizations; the Jane Goodall Institutes 'Roots and Shoots' and 'Young Democrats'. Bryce spent two separate trips in 2004 and 2005 in St. Petersburg, Russia, representing the United States youth programs at the Ecology of War and Peace. Bryce participated in the Christian Appalachian Project in Eastern Kentucky this spring. Participants repaired, and built homes while positively influencing the impoverished Appalachian region.

Erk Doozen, MHS, is the Public Health Programs Assistant for the National Indian Health Board. Ms. Doozen was born in Baltimore, Maryland and is a member of the Lumbee Tribe of North Carolina. Ms. Doozen graduated in 2002 from the University of Maryland at College Park with a Bachelor of Arts degree in Communication. She continued to pursue higher education in the field of public health and graduated from Johns Hopkins Bloomberg School of Public Health in May 2009 with a Master of Health Science degree. In her free time, Ms. Doozen enjoys training for a variety of athletic races and has completed two half marathons, a triathlon and a half century bike race.

Jennifer Cooper JD, MPA, is an enrolled member of the Seneca Nation of Indians. She joined the National Indian Health Board (NIHB) in March 2009 as the Legislative Director advocating on behalf of all American Indians/Alaska Natives for quality health care. Her professional background includes working for the Los Angeles City Ethics Commission; serving as summer law clerk for the California Indian Legal Services; working for the law firm of Stradling Yocca Carlson & Rauth and working for Kaiser Foundation Health Plan, Inc., in Oakland, California. During the 2008 Presidential general election, Jennifer served as a Get-Out-The-Vote Organizer for the Obama campaign in Nevada. Jennifer holds a Juris Doctor from Cornell Law School, a Master of Public Administration from Syracuse University, and a Bachelor of Arts degree from Colgate University.

Jessica L. Burger, RN, ADN, is a member of the Little River Band of Ottawa Indians located in Manistee, Michigan. She currently serves as the Director of Government Relations for the National Indian Health Board, and was the Bemidji Area Representative, Member-At-Large as part of the NIHBI Board of Directors. As Health Director for her tribe, she acted as lead proponent of and negotiator for the Little River Bands move to self-governance; the Tribes DHHS/IHS compact was ratified in February 2009. She was honored by the Little River Band as the "Director of the Year, 2007" and had served as part of the Joint Rulemaking Committee on Tribal and Federal Self-Governance, as well as the DHHS and IHS Consultation Policy committees. She and her husband, Fred Burger have three daughters, Chelsea Bromley (attending University of Michigan), Olivia Burger (attending Ferris State University) and Isabel June.

John L. Johns, JD, is a Federal Regulations and Policy Analyst for the National Indian Health Board in Washington, DC. John works with the Centers for Medicare & Medicaid Services (CMS) on issues in support of the Tribal Technical Advisory Group (TTAG). John is a graduate of the University of North Dakota School of Law. While attending law school, John served twice as a legal intern with the United States Senate Committee on Indian Affairs on the staff of Senator Byron L. Dorgan of North Dakota. He assisted the Staff Director and General Counsel of the Committee on issues such as Indian trust reform, Indian health care and law enforcement jurisdiction in Indian Country. John also worked as a law clerk for the Tribal Judicial Institute (TJI) at the University of North Dakota. At the TJI, he worked on issues pertaining to the Indian Child Welfare Act, parental rights, adoption, elder care and law enforcement jurisdictional difficulties in Indian Country. John is a member of the Monacan Indian Nation of Virginia, where he has had the honor of serving as a Tribal Council member and Assistant Chief.

Krisly Poitra is a member of the Turtle Mountain Band of Chippewa Indians in Belcourt, North Dakota. Ms. Poitra graduated from the University of North Dakota with a B.A. in Social Science and a minor in Criminal Justice. She also obtained a certificate in Event Planning from Clayton State University. Ms. Poitra is the Events and Meetings Coordinator for the National Indian Health Board in Washington, D.C.

Lynette Willie is a member of the Navajo Nation, born into the Navajo traditional clanship system to the Yéíí Tááchii'nii Dine'é clan (Giant People of the Red Running into the Water People) and born for the Tse'nahahíi Dílan (Sleep Rock People). Willie is one of Indian Country's foremost authorities on mobilizing Indian communities through public relations and public policy to address critical behavioral health issues. Willie created a poster series on behavioral health issues that was widely distributed throughout the United States with over 50,000 prints. Willie spearheaded the Navajo Nation's Methamphetamine Task Force which was the recipient of the "2006 Honoring Nations Award" from Harvard University. Willie is the former Public Information Officer for the State of Utah Division of Substance Abuse and Mental Health where she assisted in tribal consultation policy signing between the State of Utah and the seven federally recognized tribes in Utah and the Indian Walk In Center. Willie also is a former PIO for the Navajo Nation Department of Behavioral Health Services.

Tyra Baer is the Centers for Medicare & Medicaid Services (CMS) Project Assistant for the National Indian Health Board. Ms. Baer is a member of the Northern Cheyenne Tribe of Lame Deer, Montana. She graduated from Iowa State University with a B.A. in Cultural Anthropology and a minor in Native American studies. While attending ISU she was President of the United Native American Student Association and worked to preserve after school programs at the Sac and Fox Settlement. In 1997 she graduated from the Indigenous Study Linkage Program at the University of Ibadan in Nigeria. Tyra newly resides in Arlington, VA and spends her free time with her beautiful and entertaining three year old daughter, Jaden.
CONFERENCE PARTICIPANT BIOGRAPHIES

Kelly Acton, MD, MPH
Dr. Kelly Acton is the Director of the Indian Health Service National Division of Diabetes Treatment and Prevention. She has worked in the IHS for over 25 years. In 1981, Dr. Acton received her M.D. degree from Jefferson Medical College in Philadelphia and in 1996 received a Master of Public Health (MPH) degree from the University of Washington. She is board-certified in internal medicine. Over the years she has worked as a clinician and Diabetes Consultant on the Crow and Flathead Indian Reservations in Montana and the Eastern Band of Cherokee Indian Reservation in North Carolina. She was one of the first Area Diabetes Consultants in the IHS. In September 1997 she was asked to move to Albuquerque to assume her current position as Director of the IHS Division of Diabetes Treatment and Prevention which has gone from a $7.7 million/yr program in 1996 to a $160 million/yr program in 2009. Dr. Acton is active in national diabetes activities. She serves as the HHS representative to the National Institutes of Health Diabetes Interagency Coordinating Committee. She is a member of the Steering Committee of the National Diabetes Education Program, a joint project of the NIH and CDC, and a member of the Diabetes Prevention Program Outcomes Study (DPPOS) Committee. Dr. Acton is married to Dr John Peterson, a clinical pharmacist, and is the mother of two children, Mariah (21) and Skylar (17).

W. Ron Allen
W. Ron Allen, Tribal Chairman/Chief Executive Officer of the Jamestown S’Klllal’h Tribe is responsible for leading the Tribe from a zero resource base in 1982 to current annual budget level of approximately $7 million; from a landless reservation base in 1982 to a land base of approximately 1,000 acres without federal assistance; and, establishing business enterprises that include Seven Cedars Casino, Northwest Native Expression Art Gallery, JKT Development, and Jamestown Health & Medical Supplies.

Anna Arroyo, MA, MPH
Anna Arroyo received a Bachelor of Science in Foreign Service from Georgetown University. She holds a Master of Arts in Peace Studies from the University of Notre Dame and a Master of Public Affairs from the LBJ School of Public Affairs, University of Texas at Austin. Prior to attending graduate school, Anna worked with several environmental organizations on U.S.-Mexico Border sustainability and habitat protection issues. Anna is the Lead Program Examiner of the Indian Health Service at the Office of Management and Budget.

Jeff Bachar, MPH
Mr. Bachar has a wide range of public health experience including chronic disease prevention and health promotion, infectious disease outbreak education, HIV prevention, as well as program management. His professional interests include community-based participatory interventions, social marketing, and the use of logic models for program development and evaluation and workforce wellness. He holds a master’s degree in public health (MPH) from Tulane University School of Public Health and Tropical Medicine. Mr. Bachar currently serves as the principal investigator and program director for the Cherokee Choices community-based health promotion program in Cherokee, North Carolina. This program is funded as part of the Centers for Disease Control and Prevention’s (CDC) REACH US program to eliminate health disparities and is currently the only community-based health promotion research project in western North Carolina. The purpose of the REACH US intervention in Cherokee is to assist with individual health behavior changes as well as organizational changes to promote health and policy changes. Cherokee Choices was recently recognized as an example of progress by the Institute of Medicine in the report, “Progress in Preventing Childhood Obesity: How Do We Measure Up?”

Beth Babé, BS
2009 Morehouse Public Health Summer Fellow
Ms. Babé graduated from the University of Arizona with a Bachelor of Science in Nutritional Science and a minor in Chemistry and American Indian Studies. She completed a 2009 public health summer fellowship offered through the Morehouse School of Medicine in Atlanta, Georgia. Her fellowship placement was at the Centers for Disease Control and Prevention in the Office of Minority & Women’s Health, in the Division of Emerging Infections & Surveillance Services under the guidance of Dr. Marian McDonald. Her project was titled, Identifying Neglected Infections of Poverty among American Indian and Alaska Native Children. Beth recently accepted a research associate position at the Translational Genomics Research Institute in Phoenix, Arizona.

Carol L. Barbero, LLP
Carol L. Barbero is a partner in the Washington, D.C. office of Hodes, Straus, Dean & Walker, LLP, a law firm founded in 1982 which specializes in the practice of American Indian law. The firm represents Indian tribes and Indian organizations throughout the United States on all aspects of Indian interests— including health, education, housing, child welfare, gaming, economic development, federal and state relations and governmental jurisdiction. Ms. Barbero has spearheaded the Firm’s efforts to amend and reauthorize the Indian Health Care Improvement Act. As a member of the Medicare & Medicaid Policy Committee of the National Indian Health Board, Ms. Barbero has been a key advocate for Indian-specific provisions in health care reform legislation, and worked for enactment of the Indian provisions in the 2009 American Recovery and Reinvestment Act, the 2009 CHIPRA reauthorization, and the Medicare Modernization Act of 2003. She serves as the Nashville Area technical advisor to the Tribal Technical Advisory Group which advises CMS on Indian Medicare and Medicaid issues. Prior to joining HSDW, Ms. Barbero was an attorney with the Washington, D.C. law firm of Wilkinson, Crigan & Barker, where she began her Indian law practice. Her prior professional experience includes six years as a legislative assistant in the House of Representatives. She received a law degree from Georgetown University in 1978 and an undergraduate degree in political science from Allegheny College in Pennsylvania. She is a member of the District of Columbia bar.

Ernest Harry Begay
Ernest is a Traditional Practitioner at the Navajo Regional Behavioral Health Center (NRBHC) in Shiprock, New Mexico. He authored the Traditional Healing Component Policies and Procedures and the Traditional Healing Component Curriculum. Ernest conducts ceremonies that he learned to help people with substance abuse, mental health problems and different illness. He provides cultural education, sweat lodge ceremonies, traditional counseling (individual, family, group and marital) and cultural activities throughout the year at the NRBHC. He is a certified member of the Dine Hailalii Association as a Traditional Practitioner/Counselor.

Olivia Belen-Sloan
Ms. Olivia Sloan (Navajo Yovonna O’odham) assists with coordination of the Training and Scholarship Program, Behavioral Health Research Programs and Special Projects at the Johns Hopkins Center for American Indian Health. Olivia originally met the Center by being an Institute scholarship recipient in 2003, and later joined the Center staff in May of 2007. Prior to coming to Johns Hopkins, Olivia worked for the Inter Tribal Council of Arizona, Inc. (ITCA) in the area American Indian/ Alaska Native health care policy and health research. Olivia provided staff support to Tribal leaders in the Phoenix Area Indian Health Service on a variety of legislative issues, both on the State and Federal level. She also worked with the University of Arizona and Tribes to coordinate the ITCA American Indian Research Center for
Health, a grant funded by the NIH/IIHS Native American Research Center for Health initiative. She also lived in Alaska where she also worked with tribal leaders on health policy and budget issues. Olivia received her B.A. from the University of Arizona. She was born and raised in Santa Fe, New Mexico.

David R. Boyd MD, FACS
Dr David R. Boyd is a General Surgeon with 25 years experience in the US Public Health Service (PHS) including 12 in the Indian Health Service (IHS), as the staff surgeon at the Blackfeet Community Hospital in Browning, MT. He graduated from Central Washington College of Education in Ellensburg, WA, with a Bachelor of Arts and Science in 1958. His combined majors were Psychology and Pre-Medicine. His medical education is from McGill University in Montreal, PQ, Canada, graduating MD/MC in 1963. He was drafted into the US Army, serving as Captain in the Medical Corps from 1964–66. He returned to surgical training at the University of Maryland and was a “Shock–Trauma Fellow” at the developing Maryland Institute for Emergency Medical Services Systems (MIESS). He returned to the CCH surgery program and became the “Resident Director” of our nation’s first civilian Trauma Unit (TU). He established the first “Computerized Trauma Registry” under an NIH grant. He designed and implemented Trauma and EMS Programs, and Operating Components statewide. In 1972 he testified before the US Congress on the need for a National EMS System. He was appointed National Director of the Office of EMS/MSS, DHHS-DHHS. In this capacity he worked with public and private sectors, state, territorial, local and tribal governments, health and safety, professional, public advocacy and political interests in Trauma and EMS. Dr. Boyd left the Federal Government in 1983 and established a private EMS/MSS consulting firm working with domestic and international clients. He is currently the National Trauma Systems Coordinator in the Office of Emergency Services (ES), Indian Health Service (IHS) Rockville, MD. He is the IHS representative to the Federal Inter Agency Committee for Emergency Medical Services (FICEMS) and Council on Emergency Medical Care (CEMC) coordinating entities. Dr. Boyd has published over 110 scientific articles on Trauma, Shock and Trauma/EMS Systems including a textbook on EMS Systems. He has received many honors including the “Distinguished Career Award” from the American Public Health Association (APHA), Injury Control and Emergency Medical Services Section in 1998 and the National Safety Council (NSC) Surgeons’ Award for Service to Safety and the Journal of EMS Physio Control “Living Legends of EMS Award” in 2006. Dr. Boyd is married to Joyce M. Boyd MDMC, FAAP. They have four adult children and four grandchildren.

Kay Branch, MA
Kay Branch is employed as the Elder/Rural Health Program Coordinator at the Alaska Native Tribal Health Consortium, focusing on the health status and long-term care needs of Alaska Native Elders. She has over 15 years of experience working with Alaska Native elders, including Older Americans Act programs, personal care services, and assisting living and workforce development issues. Under agreement with the Indian Health Service, Kay provides technical assistance in long-term care service development to IHS Elder Care Grantees. She received a bachelor’s degree in anthropology from the University of Alaska Anchorage, and a master’s degree in applied anthropology from the University of South Florida, with a focus in gerontology specifically related to American Indian and Alaska Native elders.

Brenda A. Broussard, MPH, MBA, RD, CDE, BC-ADM
Brenda Broussard is a Health Care Consultant specializing in diabetes, nutrition and healthy weight and has over 25 years experience working in American Indian communities. Ms. Broussard is a clinical diabetes educator at Presbyterian Family Practice in Albuquerque, NM.

Tammy L. Brown, MPH, RD, BC-ADM, CDE
Captain Tammy Brown, U.S.P.H.S., IHS Division of Diabetes Treatment and Prevention (IHS DDTTP) Nutrition Consultant, has 29 years of experience as a Registered Dietitian (RD), 17 years as a Certified Diabetes Education (CDE), and she has completed the requirements for the American Dietetic Association (ADA) Certificate of Training in Adult Weight Management. In Working with IHS DDTTP programs since 1991, Ms. Brown has presented to patients, families, and communities, lay health workers, and professionals on a variety of topics related to diabetes management and medical nutrition therapy. She has published numerous articles and written on Meal Planning Strategies for Ethnic Populations.

Ann Bullock, MD
Dr. Ann Bullock is a Board-certified family physician who has worked for the Indian Health Service since 1990. She received her A.B. from Brown University, M.D. from the University of Washington and completed a residency in family medicine at the University of Minnesota. Dr. Bullock has worked with the Eastern Band of Cherokee Indians for all of her tenure in IHS, first as a clinical physician then becoming the Medical Director for the tribe’s Health and Medical Division in 2000. She is the IHS Chief Clinical Consultant for Family Medicine and just recently started to work for the IHS Division of Diabetes Treatment and Prevention. Dr. Bullock served on the Institute of Medicine’s Committee on Progress in Preventing Childhood Obesity, whose report was published in 2007. She speaks regularly across the country on diabetes-related issues, including on the connection of stress and early life adverse experiences with diabetes risk. Dr. Bullock is an enrolled member of the Minnesota Chippewa Tribe.

Ben Butler
Ben Butler, Vice President for Cottingham & Butler Consulting Services leads the firm’s Native American team. A Cum Laude graduate of Illinois Wesleyan University. He has worked with tribal councils, human resources, clinics, pharmacies and contract health departments over the past 12 years. Ben has helped developed Native American wellness programs that are saving thousand of lives and dollars each year.

CAPT Jay C. Butler, MD
CAPT Jay C. Butler, MD is Director of the H1N1 Vaccine Task Force at the CDC. He was Chief Medical Officer for Alaska from 2007 to 2009 until coming to Atlanta in June to assist with the H1N1 response. Earlier assignments have included serving as Alaska State Epidemiologist, 2005-07, Director of CDC’s Arctic Investigations Program, 1998-2005, and medical epidemiologist in CDC’s National Center for Infectious Diseases, 1991-98. He has been a clinical infectious diseases consultant and chaired the Infection Control Committee at Alaska Native Medical Center in Anchorage. He is a graduate of the University of North Carolina Medical School, has completed clinical training at Vanderbilt and Emory Universities, and is board certified in infectious diseases, internal medical, and pediatrics. He has authored or co-authored over 100 scientific papers and medical textbook chapters on infectious diseases and emergency preparedness. His varied professional experiences include working as a physician for two months at a mission hospital in Kenya, leading the CDC field response to the initial Hantavirus pulmonary syndrome outbreak in the US in 1993, and serving as the CDC liaison to FBI Headquarters in Washington, DC during the investigation of the anthrax attacks in the fall of 2001. He was a team co-leader during the CDG responses to the SARS outbreak of 2003, avian influenza in 2004, and Hurricanes Katrina and Rita in 2005. He was governor of the Alaska chapter of the American College of Physicians from 2005 to 2009 and chair of the Association of State and Territorial Health Officials Infectious Diseases Policy Committee 2008 to 2009. Dr. Butler is a father of five, and became a grandfather in 2008.

Merilee Caldwell
Ms. Caldwell recently became the Diabetes Grant Coordinator for the Shoshone-Bannock Tribes. Prior to this position she was the Community Health Educator for the Tribal Health & Human Health Education Program. She served as the tobacco program coordinator for 2 1/2 years. A member of the Shoshone-Bannock Tribes, Ms. Caldwell graduated from the College of Idaho with a Bachelor of Science degree and was a student athlete for 3 years. She is currently in her last year pursuing a Masters Degree of Health Education through Idaho State University.

Jan Chacon, BS, CHES
Jan Chacon, BS Health Science, CHES, is the diabetes prevention program coordinator at Indian Health Center of Santa Clara Valley. She has been working in the American Indian community in many capacities for many years. She coordinates the Special Diabetes Program for
Indians which is translation of the evidence based diabetes prevention program DPP sponsored by the Indian Health Service. For the past five years this program has successfully made many changes in the community attitude by carrying the “Message of Hope” We Can prevent Diabetes in Native American Communities.

Jean Charles-Azure, MPH, RD
Jean Charles-Azure is a member of the Lummi Nation in Washington State and has worked with Indian People as a nutrition professional since 1975. In 1983, Jean received an MPH degree from UC Berkeley. Jean currently works with the IHS national nutrition program which includes the Nutrition and Dietetics Training Program.

Rachael Crawford
Ms. Crawford is the Project Manager for the Association of American Indian Physicians specializing in community health initiatives nationwide. Her work focuses on American Indian health disparities and community prevention programs addressing methamphetamine. Ms. Crawford received a BA in political science from the University of Oklahoma, Norman, OK. She plans to obtain her Master's Degree in Public Administration and continue to work with Native communities on health issues.

Jim Crouch, MPH
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 Rural Health Association, California Task group on Multicultural Competence, California Telehealth/Telenmedicine Coordination Project; the California Health Information for Policy Project; the Cherokee 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.

Mary Czik, Ph.D.
Dr. Mary Czik received a B.A. in Psychology from Johns Hopkins University (1999). She earned a M.A. (2002) and Ph.D. (2005) in Child Clinical Psychology from Southern Illinois University. Dr. Czik completed a postdoctoral fellowship (2008) in the Johns Hopkins Division of Child & Adolescent Psychiatry which consisted of specialized training in interventions for youth who make recent suicide attempts. Dr. Czik then joined the faculty at the Johns Hopkins Center for American Indian Health as an Assistant Scientist. She is currently working on three community-based participatory research initiatives with the White Mountain Apache Tribe targeting youth suicide prevention.

Valerie Davidson, Esq.
Valerie Davidson 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 Leavitt's (U.S. 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 Medicare & Medicaid Policy Committee of the National Indian Health Board. Most importantly, Ms. Davidson is the mother of two adorable daughters.

Yvonne M. Davis
Yvonne M. Davis comes to Johns Hopkins Center for American Indian Health with more than four years of research experience among American Indians, more so within a local NARCHI project. She received her Masters in Public Health degree from the University of New Mexico with a concentration in Community Health Interventions. In addition, her Public Health Care Management experience provides a variety of services to help create innovative solutions through public health theory and program development to American Indian tribes. As a Public Health Advisor with the CDC she served as a liaison between American Indian tribes and the National Center for Prevention Services. She actively volunteers for many non-for-profit agencies and serves on several Advisory Councils that seek to implement public health practices. Yvonne is currently the Quality Assurance/Research Coordinator with the Johns Hopkins University Center for American Indian Health where she is responsible for conducting quality control assessments on data forms and audio recording to ensure intervention fidelity and for providing on-site technical assistance.

Ronald Demary, BS, MAEA
Ron Demary serves as the Associate Director for Self-Determination Services in the Office of Tribal Programs, Indian Health Service (IHS) Headquarters in Rockville, MD. Mr. Demary is a member of the Northern Cheyenne Tribe of Indians and grew up on their beautiful pine covered reservation in Southeastern Montana. Mr. Demary attended college and university in Montana where he received a Bachelor's Degree in Business Administration and a Masters of Education Degree. Upon receiving his Masters Degree, Mr. Demary assumed the position of Dean of Business Affairs at Dunn Knob Memorial College in his hometown of Lame Deer, Montana. Ron Demary later served as the Director of Administrative Services for the Ramah Navajo School Board in Pinehill, NM, and later represented the School Board in annual contract negotiations with both the Bureau of Indian Affairs and the IHS. Mr. Demary served on the National Negotiated Rulemaking Committee for developing regulations for implementation of the 1998 and 1994 amendments to Public Law 93-638. In January 1996, Ron came to work for the Office of Tribal Program where he continues to work on behalf of all Tribes and Tribal Organizations. Ron heads up the Agency's Headquarters Leadership Team that reviews IHS Self-Determination policy issues. He also serves as the IHS technical expert on contract support cost policy matters and recently headed up the IHS/ Tribally Operated Health Programs PART team.

Dorothy Dupree, BS, MBA
Dorothy A. Dupree, MBA, a member of the Assiniboin and Sioux Tribes, is the Director, Tucson Area Indian Health Service (IHS). Ms. Dupree has extensive IHS and U.S. Department of Health and Human Services (DHHS) career experience in working with the IHS and tribal leadership served by the Tucson Area. Ms. Dupree previously served in the IHS Albuquerque Area as the Acting Area Director, Executive Officer, and the Director of Tribal Affairs. She also worked as Finance Director for the Pascua Yaqui Tribe prior to joining the IHS. In 1999, Ms Dupree was detailed to the Centers for Medicare & Medicaid Services (CMS) to serve as the Senior Policy Advisor, Indian health programs, and subsequently began working directly for CMS in the same capacity as Senior Policy Advisor. In 2007, Ms. Dupree became the Director of the Tribal Affairs Group, a new office established within the CMS Office of the Administrator. Ms. Dupree received her bachelor's degree in education from the University of North Dakota and her master's degree in business administration from the University of Arizona.

Stacey Ecowey
Stacey Ecowey is the Principal Advisor for Tribal Affairs, Office of Intergovernmental Affairs, and U.S. Department of Health and Human Services. Stacey provides advice and council to the Director about the health and human service needs in Indian Country. She is a member of the Oglala Sioux Tribe (Pine Ridge, SD). Stacey is the liaison for the following external groups: The National Congress of American Indians; The National Indian Child Care Association; The National Indian Child Welfare Association; and, The National Indian Health Board.

Christine C. Ferguson, JD
Christine C. Ferguson, J.D. is charged with coordinating the day to day activities of the STOP Obesity Alliance. In addition to this role, Ms. Ferguson is a member of the faculty at the School of Public Health and Health Services at The George Washington University.
Ms. Ferguson's prior professional experiences have made her adept at evaluating, prioritizing and working to address significant public health issues. As Commissioner, Ms. Ferguson oversaw the Department of Public Health and the Department of Health Care Finance and Policy. She led initiatives addressing public health emergencies, established a unique collaboration with the Executive Office of Public Safety, and implemented the Betsy Lehman Center for Patient Safety and Medical Errors Reduction. She was also a key member of a two-year effort to establish a new department for Early Education and Child Care. Ms. Ferguson is currently a member of the Board of Directors, Youth and Families for the Institute of Medicine National Academies. She has served on the boards of the National Academy of State Health Policies and a variety of other national organizations. Ms. Ferguson holds a B.A. from the University of Michigan and a J.D. from Washington College of Law, American University.

Bruce Finke, MD

Dr. Finke is a family physician and geriatrician and serves as the national lead in Elder Care and Palliative Care for the Indian Health Service. Since 1998 he has provided support to tribal, IHS, and urban programs in the development of improved clinical and preventive care for the elderly. He has had a leadership role in the development of long term care policy, in support of tribal long term care programs, and in the development of palliative care resources in Indian health. As a physician at the IHS Hospital in the Pueblo of Zuni from 1991 to 2003 he worked in an interdisciplinary team setting to develop innovative elder care programs and collaborated closely with Tribal programs in the development of services in the community, including a tribal hospice program. He now works with the Tribes of the Nashville Area and nationally in the development of health care services for Elders. Dr. Finke has also been a member of the Chronic Care Initiative leadership team since the summer of 2006.

Ed Fox, Ph.D.

Ed Fox has a doctorate in Political Science from the University of Washington (1993). Dr. Fox taught state government and health policy as an Assistant Professor of Government at Eastern Washington University from 1991 to 1995. Ed began his work for Tribes as the Policy Analyst at the Northwest Portland Area Indian Health Board in 1995 and as the Board’s Director from 2000 to 2005. After assisting Nevada tribes establish the Indian Health Board of Nevada in 2005-6, Ed returned to the Northwest in 2006 as the Assistant Health Director of the Squeian Island Tribe of Washington State and became its director in 2007.

Rick Friedman

Rick is the Director of the Division of State Systems within CMS. Currently, he directs CMS Medicare HIT/EEHR activities described in ARRA, Section 4201. Together with the ROs, his office provides FFP to state Medicaid agencies for their MMIS and Medicaid portion of multi-agency eligibility determination systems. In addition, his office has led a major initiative to develop the Medicaid IT Architecture (MIA). CMS believes MIA is the essential link between the Medicaid systems of the past and the enterprise-wide systems of the future. He earned an undergraduate degree from Colgate (Economics) and an MBA (Finance) from Dartmouth.

Charlene Frizzera

Charlene Frizzera was appointed Acting Administrator of the federal Centers for Medicare & Medicaid Services (CMS) in January 2009. She has served in a variety of leadership posts at this $700 billion health care agency, which covers health care for approximately 100 million Americans, with 10 regional offices and more than 4,000 employees nationwide. Her experience includes serving as CMS’s Chief Operating Officer, responsible for overseeing not only the gutmix of CMS’s day-to-day operations, but also implementation of new programs. During her tenure as COO, she guided the implementation of the Medicare Prescription Drug Program (Part D). Previously, Charlene served as Deputy Director of CMS’s Center for Medicaid and State Operations (CMSO), the CMS liaison to state and local governments. At CMSO she managed federal policy and regulation for Medicaid, the State Children’s Health Insurance Program, the Clinical Laboratory Improvement Act, Survey and Certification, and the insurance reform provisions of the Health Insurance Portability and Accountability Act. Prior to moving to CMS Headquarters, Charlene was CMS’s Regional Administrator in Region III, encompassing Pennsylvania, Maryland, Delaware, Virginia, West Virginia, and the District of Columbia. Charlene has received numerous awards for her leadership, including the Secretary’s Distinguished Service Award and the HCFA Leadership Award. She is a two-time recipient of the Presidential Rank Award for Distinguished Executives, awarded to only 50 Senior Executive Service managers in the U.S. Federal government.

Cyndi Gillaspie

Cyndi Gillaspie is the Native American Contact (NAC) for the CMS Denver Regional Office and leads a team of NACs in the ten CMS Regional Offices. The NACs serve as the primary contact for I/PTUs and Indian Tribes in the CMS Regional Offices. Since early spring, Ms. Gillaspie has been working as a Subj ect Matter Expert with the staff in the CMS Central Office on policy development for the changes in the new laws that have an impact on Indians and Indian health programs. Prior to working for CMS, Ms. Gillaspie worked for the State of Wyoming for eleven years as a County Eligibility Worker, County Eligibility Supervisor and State Medicaid Consultant. Since beginning work for CMS in 1998, Ms. Gillaspie has worked in Medicaid and CHIP administration, eligibility, coverage and reimbursement, as well as I/PU policy in Medicare, Medicaid and CHIP.

R. Turner Goinz, Ph.D.

Dr. Goinz received her MS and Ph.D. in Gerontology from the University of Massachusetts Boston and has completed a National Institute on Aging Post-Doctoral Research Fellowship at Duke University’s Center for the Study of Aging and Human Development. Since 2000, her research program has primarily focused on American Indian and Alaska Native elders which were initiated through a two-year training grant with the Native Elder Research Center at the University of Colorado Health Sciences Center. Dr. Goinz is currently examining physical disability and long-term care needs among older American Indians as the recipient of funding from the National Institute on Aging at the National Institutes of Health. In addition, Dr. Goinz is a faculty member of the Native Elder Research Center and a member of the Title VI American Indian, Alaska Native, and Native Hawaiian Nutrition, Supportive and Family Caregiver Services Technical Advisory Group. Dr. Goinz has served on the editorial board of the Journals of Gerontology: Social Sciences, Journal of Applied Gerontology, and Journal of Native Aging & Health and is a Fellow of the Gerontological Society of America.

Melissa Gower

Melissa received her Bachelor of Science in Health Care Administration from Northeastern State University where she graduated Magna Cum Laude. She was the recipient of the Henry J. Kaiser Family Foundation Native American Health and Welfare Policy Fellowship. She spent one year working for Senator Ben Nighthorse Campbell, Chairman, Senate Committee on Indian Affairs, where she performed legislative duties on several issues, including health, self-governance, family, and elder issues. Melissa is a Cherokee tribal citizen and has worked for her tribe, Cherokee Nation, for a total of sixteen years. In 1999 she was named the Executive Officer in the Office of the Principal Chief, where she performed executive level duties as the Direction Team Leader. She was responsible for the operation of strategy, government relations, solutions development, and communications. In August 2003, she was also named the Group Leader for the Cherokee Nation Health Services Group, which is the largest Cherokee Nation group with approximately 1,505 staff and a budget in excess of $190 million. Melissa has over sixteen years tribal management experience. She also spent four years working as a health planning consultant to various Indian tribes and organizations throughout the United States. She has received numerous awards including: “Oklahoma City Area Indian Health Service Area Director’s Service Award,” “Excellence in Management Award,” “Superior Management Award,” and “Employee of the Year Award.”

Garth N. Graham

Dr. Garth N. Graham is the Deputy Assistant Secretary for Minority Health in the Office of Minority Health at the Department of Health and Human Services. The Office of Minority Health develops and
Paula Hammond
Paula Hammond began her career with the federal government in 1974. She has worked with Indian Country, TrailBlazer Health Enterprises. She has written two papers on many AIDS, HICFA, CMS, and DHHS and has served on numerous national workgroups. In 2009, she received the Regional Director's Leadership Award for expertise and commitment to addressing Indian Country issues. Paula obtained an Associate in Arts degree from Tyler Junior College and transferred to the University of Texas at Austin graduating Magna Cum Laude with a Bachelor of Arts degree. She also obtained a Master of Liberal Arts degree from Southern Methodist University.

Amanda Harris, 2009 Morehouse Public Health Summer Fellow
Ms. Harris, 21 is currently completing her junior year as Biology major at the University of New Mexico. During 2009 she served as intern at Centers for Disease Control and Prevention with Heather Brink, MPH/MS in the National Center for Health Marketing, Division of eHealth Marketing/Interactive Media Content Team. Her project was titled Mobile Phone Usage in Underserved Populations.

John Mosely Hayes, DrPH, MBA, MSPH
Dr. Mosely, Captain, US Public Health Service United South and Eastern Tribes, Inc., Indian Health Service (IHS), US Department of Health and Human Services, Dr. Hayes is on permanent assignment from the IHS Division of Epidemiology and Disease Prevention to the United South and Eastern Tribes, Tribal Epidemiology Center, as a Senior Epidemiologist. Some of his past experience includes serving as a Center for Disease Control and Prevention Career (CDC) Epidemiology Field Officer (2002-2004), CDC Epidemic Intelligence Service Officer (2000-2002), US Air Force Public Health Officer (1994-2000), and US Peace Corps Volunteer (1987-1990). He worked domestically on strengthening emergency preparedness, influenza and West Nile Virus surveillance, outbreak response, tobacco use prevention policy development, and research protocol management, and internationally on mosquito borne disease control in Thailand, El Salvador, Puerto Rico, and Japan, general public health management in Japan, and occupational safety and health strategic management in Thailand. His focus on American Indian and Alaska Native (AI/AN) health issues began in 2004 when he joined IHS where he was first assigned to the IHS Bemidji Area Tribal Epidemiology Center, followed by his current assignment to the IHS Nashville Area Tribal Epidemiology Center. In addition to guiding and managing on the Tribal Epidemiology Center team that provides epidemiological services to federally recognized AI/AN communities and programs located in a 22 state region in the eastern and southern US, Dr. Hayes also serves as a lead on building collaborative efforts between the national network of Tribal Epidemiology Centers. He has also served on other initiatives such as the Center for Medicare and Medicaid Services Technical Tribal Advisory Group Data Subcommittee, the Tribal Forum on Legal Foundations for Public Health Practice in Indian Country, and is currently serving on the Council of State and Territorial Epidemiologist and Tribal Epidemiology Center Workgroup. Captain Hayes also served two consecutive three year appointments to the US Surgeon General's Scientist Professional Advisory Committee.

Aleena Hernandez, MPH
Ms. Hernandez is the Principal and Founder of Red Star Innovations, and serves as the technical lead for the National Indian Health Board's Tribal Public Health Accreditation Project and Tribal Public Health Capacity Assessment. She has 15 years of experience in capacity development with tribes, tribal agencies and programs serving Native Americans. Much of Ms. Hernandez's work focuses on strengthening partnerships with tribal and non-tribal entities to advance shared goals in the fields of public health, research and education. In addition, Ms. Hernandez is an Adjunct Lecturer at the University of Arizona, College of Public Health, and Division of Health Promotion Sciences.

Socorro Herrera, BSN
2009 Morehouse Public Health Summer Fellow
Ms. Herrera is a recent graduate from Southern Utah University receiving a Bachelor of Science in Nursing Degree. During her stay
at SUU she played an active part at SUU Multicultural Center where she was President and worked to raise student scholarships. As a Public Health Summer Fellow, Soxroorf interned with Capt. Yvonne Green and Capt. Mike (Pelagic) Sneed Senior Tribal Liaison for Policy and Evaluation OD/Office of the Chief of Health Practice. In this capacity Soxroorf examined, Strengthening and Understanding CDC’s Partnership with American Indian/Alaska Native Tribes and Community Health Practice.

Ron His Horse Is Thunder
Ron His Horse Is Thunder is a member of the Hunkpapa-Lakota Oyate and currently serves as the Tribal Chairman of the Standing Rock Sioux Tribe. In this capacity, he is also the Chairman of the Great Plains Tribal Chairman’s Association.

In 1988 he received his Juris Doctorate from the University of South Dakota School of Law. In 1985, he received a Bachelor of Science degree from Black Hills State University. His Horse Is Thunder began his career by serving in several professional capacities, e.g., as an attorney, director, and grants evaluator on the Rosebud and Standing Rock Sioux reservations. From 1991-1993, His Horse Is Thunder served as president of Standing Rock College, where he was responsible for the overall college operations. He took two years off as president of Standing Rock College and headed the American Indian College Fund based in New York, NY where he served as the president from 1993-1995. In 1995, he accepted the position of president at Little Hoop Community College in Fort Totten, ND. Returning to the presidency of Sitting Bull College (formally Standing Rock College) in 1996, His Horse Is Thunder served in this capacity until his election as Tribal Chairman in 2005. His Horse Is Thunder has served as a commissioner for the Higher Learning Commission for the North Central Accreditation for Schools and Colleges. He also served on the boards of the American Indian Higher Education Consortium and North Dakota Tribal College Association. In 2002, President George W. Bush appointed him as Chairman of the President’s Board of Advisors on Tribal Colleges and Universities of which he continues to serve today. His Horse Is Thunder is married to Deborah Wests-His Horse Is Thunder.

Joseph J. Jacobs, MD, MBA
Joe Jacobs, M.D., M.B.A., graduated from Emerson High school in Union City, NJ and received his bachelor degree from Columbia University and his medical training at Yale University, School of Medicine. After completing two years of a pediatric residency at the Dartmouth-Hitchcock Medical Center and a senior residency at Yale Medical School, Department of Pediatrics, he entered the Indian Health Service and served as a pediatrician at the Gallup Indian Medical Center in Gallup, NM. Upon completion of his assignment with the Indian Health Service, he became a Robert Wood Johnson Clinical Scholar at the University of Pennsylvania, School of Medicine. As a Clinical Scholar, he pursued an M.B.A., with an emphasis on health care administration, focusing on the use of “low level” technology in third world settings. Dr. Jacobs is a member of the St. Regis Mohawk Tribe in upstate New York as well as the Kahnawake Tribe in Quebec, Canada. He has been very active over the years with the Association of American Indian Physicians and has served as their President. Some of his activities with the Association were to secure funding from the Pew Foundation to establish a cross cultural medicine clerkship program for American Indian and Alaska Native medical students, and to counsel Native students interested in the field of medicine. He also serves on the National Advisory Committee for the Robert Wood Johnson Foundation’s Minority Medical Education Program through the Association of American Medical Colleges. Recognition of his professional accomplishments include an honorary Doctor of Science degree from the State University of New York, an honorary fellowship in the American College of Acupuncture, and presentation of the Commencement Address at the graduation exercises of the University of Colorado, School of Medicine. Dr. Jacobs is currently serving as Associate Medical Director for Abbott Molecular in Des Plaines, IL. Abbott Molecular is a major producer of genetic tests for cancer, HIV and other infectious diseases.

Devanee Jarman
Dr. Dwayne Jarman is a member of the Grand Traverse Band of Ottawa and Chippewa Indians. In 2008, he joined the Indian Health Service, Office of Clinical and Preventive Services, Division of Clinical and Community Services, Health Promotion & Disease Prevention program as a Prevention Specialist. In June 2008, Dr. Jarman completed a one-year Preventive Medicine Fellowship with the Centers for Disease Control and Prevention (CDC) where he was assigned to the National Center for Chronic Disease and Public Health Promotion. He also completed the two-year CDC Epidemic Intelligence Service (EIS) program while assigned to the North Dakota Department of Health. Prior to his training with CDC, he was an Emergency Preparedness Coordinator with the Great Lakes Inter-Tribal Council, a Tribal Health Consultant for the Grand Traverse Band of Ottawa and Chippewa Indians, a CDC Dr. James A. Ferguson Emerging Infectious Diseases Fellow, and an Epidemiology Intern with the Great Lakes Inter-Tribal Council. Dr. Jarman completed his Masters in Public Health in general epidemiology from the University of Michigan in 2002 and his Doctorate in Veterinary Medicine from Michigan State University in 2000.

Thomas L. John
Thomas L. John is the Administrator of the Division of Self-Governance for the Chickasaw Nation and is the Chairman for the Oklahoma City Area Inter-Tribal Health Board Treasurer of the National Indian Health Board. Mr. John received a Bachelor of Science degree in Public Relations from Syracuse University in May 1990. He received a Certificate in Public Health from the University of Oklahoma, Health Sciences Center, and College of Public Health in May 2006, and is currently enrolled in the master of public health program at the University of Oklahoma. Thomas has worked with American Indian tribes for his entire professional career, including positions in the area of tribal administration, law enforcement, health, gaming and parks & recreation and has been responsible for many multi-million dollar programs. Mr. John has worked with tribal health programs for over thirteen years, including positions for both individual tribes and a tribal consortium. He spent eight years working specifically with program management on tribal diabetes. Thomas L. John has represented numerous American Indian tribes on a regional and national level. He has helped develop a variety of federal Indian health policies, including analysis of federal legislation, consultation between Indian tribes and the federal government, health disparities and health allocation methodologies. Thomas John is an enrolled member of the Seneca Nation of Indians, and was raised on the Allegany Reservation in New York State. He belongs to the turtle clan, and is also a member of the traditional longhouse. His wife is Lisa, a Chickasaw, and they have two children, Lauren and Trevor.

Mr. Steven K. Janeau
Mr. Janeau is Vice-President/Director of Training of Lamar Associates and a former federal special agent in charge. Throughout his two decade public safety career he served as a police officer, special agent, Indian Police Academy Deputy Chief, Assistant Special Agent in Charge and BIA Special Agent in Charge. Mr. Janeau is a graduate of the FBI National Academy, International Association of Chiefs of Police, and Federal Law Enforcement Training Center Executive Management. Mr. Janeau directs Indian Country Training, a division of Lamar Associates which has trained over 1,300 attendees in programs such as the DOJ COPS supported Indian Country Anti-Meth Training Program; and currently the Prescription Drug Abuse in Indian Country training to Tribes throughout the United States. A nationally recognized speaker he has presented to the University of Montana-School of Law; University of Oklahoma; International Association of Chiefs of Police; Department of Justice- Tribal Justice Summit; National Sheriffs Association; National Native American Law Enforcement Association, Steve is an enrolled tribal member of the Haida and Tlingit Tribe of Alaska and descendent of the Blackfeet Nation of Montana.

Jefferson Keel
Jefferson Keel, Lieutenant Governor of the Chickasaw Nation, is firmly committed to the service of Indian people and actively supports their desire to become self-reliant. The welfare of the Chickasaw people is his first priority. He 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.” Lt. Governor Keel is the 1st Vice-President of NCAI, Chairman, HIS TSGAC, on the NICWA Board of Directors, Chairman, IHS Policy Advisory Committee, and Delegate to the CDC-TCAC, the DOJ-TAG, and the IHS FAAB.
Melanie Fournier Knight
Melanie Fournier Knight is a member of the Cherokee Nation located in Tahlequah, OK. She was nominated by the Chief and confirmed by the Tribal Council in 2006 to serve the Nation as its Secretary of State. Formerly she served the Nation as its Government Resources Group Leader and as its Self-Governance Administrator. Ms. Knight has served on innumerable national, state, area and tribal committees and work groups, including the Tribal Self-Governance Advisory Committee, Tribal Technical Advisory Group to CMS, IHS/Tribal Joint Rulemaking Committee regarding Self-Governance and many more.

Carol Korenblat, Ph.D.
Carol Korenblat, Ph.D., is the Research Director of the California Rural Indian Health Board (CRIHB). She has worked with CRIHB on health services and health policy research since 1998. Prior to joining the CRIHB staff in 2005, she was on the faculty at the University of California San Francisco, School of Medicine in the Institute for Health Policy Studies for nearly 30 years. Her work in Medicaid financed services and health policy led to joint projects with CRIHB on improving data quality and completeness for American Indians in California. Work with CRIHB on Indian Health Service funding of California Tribal Health Programs determined that higher levels of funding were associated with better health outcomes. These collaborative research studies have been honored by Academy Health (association for health services and policy research) and the Indian Health Service, Division of Planning, Evaluation and Research. For the last three years she has worked with the Tribal Technical Advisory Group for the Centers for Medicaid and Medicare Services on using and improving national Medicaid and Medicare data for American Indians and Alaska Natives.

Walter Lamar
Walter Lamar has over 20 years experience in the law enforcement and security industry. Drawing on his experience, Mr. Lamar brings insight, initiative and ingenuity to the most complex investigative, law enforcement, security and preparedness issues. Mr. Lamar is one of only two agents in the history of the FBI to be twice awarded the prestigious Shield of Bravery. He was recognized for “Life Saving Deeds” in the Oklahoma City Bombing and for “Extraordinary Acts of Heroism” during a gun battle with an armed felon. An enrolled member of the Blackfeet Nation of Montana and a descendent of the Wichita Tribe of Oklahoma, Mr. Lamar’s specialized experience and unique background provide an integrated approach to his services.

Jim Lamb
Jim is the Director of Patient Financial Services for the Alaska Native Medical Center (ANMC) in Anchorage, Alaska. Jim is responsible for revenue cycle management for a tertiary hospital (ANMC) and the largest multispecialty physician practice in Alaska. Prior to his tenure at ANMC, Jim managed the Chuchuw Nation of Oklahoma Health System revenue cycle. Jim worked for Health Management Associates at the Medical Center of Southeastern Oklahoma (MCSO). During his tenure, MCSO was designated one of the Top 100 hospitals in the US. Jim started his career as a banker, Jim is a founding member of the NIHJ Medicare and Medicaid Policy Committee and the CMS Tribal Technical Advisory Group.

Francoise Larzec-Hinton
Francoise Larzec-Hinton is a member of the White Mountain Apache Tribe (WMA). She earned her Bachelor's of Arts in Business Administration from Northern Arizona University in 2003, in memory of her oldest daughter who was born with Severe Combined Immunodeficiency Syndrome (SCIDS). She took the position of NARCH Director with the Johns Hopkins Center for American Indian Health in 2004. Her research focuses on pneumococcal disease and suicide prevention. She understands the need for qualified tribal members to carry out health research programs and strives to promote health research in Native communities through community awareness, education and involvement.

Elana Leventhal
Elana Leventhal serves as policy advisor to Congressman Pallone, Chairman of the Energy and Commerce Subcommittee on Health, which maintains jurisdiction over health financing and public health

Isidro B. Lopez
Isidro B. Lopez is the Vice Chairman of the Tohono O'odham Nation. Mr. Lopez is an enrolled member of the Tohono O'odham Nation born and raised in Santa Rosa village of the Gia-Achi District. Currently residing in the Sif O'drik District where he is registered. Prior to his election he was Development Director at KOHN 91.9 FM where he also volunteered as a live on-air disc jockey. Mr. Lopez served as an elected leader for his community up until he elected to represent his district in the Tohono O'odham Legislative Council (2001-2005 serving as the Chairman of the Council in 2004.) During his term in Council he was elected to several Oversight Committees which included being Chairman of Housing and Health and Human Service, Vice Chairman of Water Resources and Domestic Affairs and member of the Agricultural Committee. After his service to our country in the United States Navy where he served in Operation Desert Shield/Storm, he was employed with the Tohono O'odham Nation as a Community Health Representative dealing with issues on Wellness, Diabetes and Health Promotion/Disease Prevention. He is a graduate of Pima Community College where he earned his degree in Administration. Nationally he serves as a member of the SANSNA Tribal Technical Advisory Committee, National Tribal Advisory Committee onBehavior Health, Tribal Leaders Diabetes Committee, Facilities Appropriations Advisory Board, and Tribal Budget Advisory Committee in the Bureau of Indian Affairs. Other Committees he served on included, South Region Coordinator for the Multi-Cultural Red Ribbon Campaign with the Arizona's for Drug Free Youth and Communities. Additionally, Mr. Lopez was a member of the Tohono O'odham Wellness Conference Committee as Co-Chair and an Advisor for the Tohono O'odham Youth Council.

Cindy Mann
Cindy Mann was appointed Director of the Center for Medicaid and State Operations (CMSO) in June 2009, where she is responsible for the development and implementation of national policies governing Medicaid, the State Children's Health Insurance Program (SCHIP), Survey and Certification, Medicaid Integrity Program and the Clinical Laboratories Improvement Amendments (CLIA). CMSO also serves as the focal point for all CMS interactions with States and local governments. Prior to her return to CMS in 2009, Cindy served as a research professor at Georgetown University, Health Policy Institute and the Executive Director of the Center for Children and Families at the Institute. Her work at Georgetown focused on health coverage, financing, and access issues affecting low-income populations. Previously, she served as Director of the Family and Children's Health Programs at CMS from 1999-2001, where she played a key role in implementing Medicaid and the SCHIP. Before joining CMS (then HCFA) in 1999, Cindy led the Center on Budget and Policy Priorities' federal and State health policy work. She also has extensive state-level experience, having
Cindy holds a law degree from New York University School of Law.

Gale Marshall
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. Current Committees: National Diabetes Education Program (NDEP) Vice Chair, American Indian/Alaska Native Workgroup; American Diabetes Association Chair, Awakening the Spirit Team (National Advocacy Team); Indian Health Service-Special Diabetes Program for Indians Demonstration Project Steering Committee; Member, Special Projects: Nike Wellness Shoe Project (N7) (Collaborative between Indian Health Service and Nike) Consultant/Qualitative Research Support; CMS Video Production: (national distribution) “Our Health, Our Community” (D/VD, 9 minutes) Two Feathers Media Production Centers for Medicare and Medicaid Services National Indian Health Board.

Kitty Marx, JD
Kathleen (Kitty) Marx joined CMS as Director, Tribal Affairs Group (TAG), Office of External Affairs in January 2009. The TAG serves as the point of contact for the agency and American Indian and Alaska Native (AI/AN) communities including tribal leaders, health providers, beneficiaries and other Federal agencies in regards to AI/AN health issues and CMS programs. Kitty brings almost twenty years of AI/AN health knowledge and policy experience to CMS. Prior to her work at CMS, Kitty was the Legislative Director, of the National Indian Health Board (NIHB), a non-profit organization representing the interests of over 560 Indian tribes. She was responsible for developing, planning and implementing the legislative and policy priorities for the NIHB. Prior to her position with NIHB, Kitty worked for the Indian Health Service (IHS) as the Special Chief of the Policy Liaison Team, Division of Regulatory and Legal Affairs. During her seventeen year tenure at IHS, Kitty was involved with major policy and legal issues affecting the agency. Prior to her work at IHS, she served as the managing attorney for the Montana Legal Services field office in Browning, tribal seat of the Blackfeet Indian Reservation. She provided services to tribal members in the Blackfeet Tribal Court and to low-income residents of the counties contiguous to the Blackfeet Reservation. Kitty received a Bachelor of Arts in History from the University of Maryland, College Park and a Juris Doctor degree from Vermont Law School, South Royalton, Vermont.

Lloyd B. Miller
Mr. Miller has practiced law in Washington D.C. and Alaska for 30 years with the law firm Sonosky, Chambers, Sachs, Miller and Munson, LLP, specializing in federal Indian affairs. A major part of his practice includes representing tribal health care providers operating federal programs under Indian Self-Determination Act contracts and compacts with the Department of Health & Human Services. In related areas, Mr. Miller was deeply involved in the legislative processes leading to the 1988, 1990, 1994 and 2000 ISDA Amendments, in additional amendments dealing with eligibility and tort claims issues, and in the regulatory processes which followed those amendments. His tribal litigation against the federal government includes a 2005 unanimous Supreme Court victory in Cherokee Nation & Shoshone Paiute Tribes vs. Leavitt, a $44 million recovery against the Indian Health Service in 2008, a $29 million recovery against the BIA over unpaid contract costs, and numerous other tribal litigations against the government. He has also long represented and advised a large coalition of Tribes and tribal organizations working in Congress to permanently end contract support cost underpayments that have penalized Tribes exercising their self-determination rights under the ISDA, and was centrally involved in seeking amendments to the ARRA bill and the FY 2009 and FY 2010 budgets to add over $100 million for CSC contract payments. Mr. Miller received his undergraduate degree from Yale University, and his law degree with honors from the University of Virginia. He serves as Board President for Trustees for Alaska, Inc., an environmental advocacy law firm, has held numerous positions with the United States Court of Appeals for the Ninth Circuit and with the Federal and Alaska Bar Associations, and served for 10 years on the Board of the Alaska Legal Services Corporation. He and his wife (Heather Kendall-Miller) have two daughters (Asha and Ruth) and a granddaughter (Shoshone).

Myra Munson
Myra Munson, J.D., M.S.W. has been a partner in the Law Firm of Sonosky, Chambers, Sachs, Miller & Munson LLP since 1990. She served formerly as the Commissioner of the Alaska Department of Health and Social Services. Ms. Munson specializes in self-determination and self-governance, federal and state advocacy, and health law. She is a technical advisor to the CMS “TAG”, has worked with the IHCA National Steering Committee since its inception, and has been active on behalf of tribes regarding health care reform initiatives. She works with direct service tribes as well as those that have assumed ISHS programs.

Ramin Naderi
Ramin Naderi has been working in the fitness and wellness industry for over 10 years. He has received a Masters of Arts in Kinesiology from San Jose State University in 2003. Ramin worked as an adapted physical education instructor for 2 years in West Valley College and was involved in establishing a phsyciobility (access for persons with disabilities) program at a local YMCA. In 2003, after the community request he started working at the Indian Health Center (IHC) in San Jose, CA. With his knowledge for fitness programming he designed an exercise program for the IHC community clinic. The fitness program started in a 10 X 10 room with three personal equipment and providers started to refer patients to the fitness program in order to control diabetes and many other chronic diseases such as arthritis, obesity, and depression. The program has grown from 30 visits per month to over 500 per month over several years and the space and equipment have increased by five times. He has received numerous awards and recognitions and has built a strong relationship with the community. As a result of bringing access to this type of service many of our community members have improved their health status. Originally he started working as a volunteer in the Indian Health Center and now he is the Community Wellness and Outreach (CWO) Director and manages 12 staff members including a dietician and an RN. CWO department, Community Wellness and Outreach, has grown into a major source for primary, secondary, and tertiary prevention in our community. Under his leadership the Wellness Center houses a wide range of health education and outreach services and has become a model for many other organizations.

Teresa Niño
In May 2009, the Obama Administration appointed Ms. Teresa Niño as Director of the Office of External Affairs (OEA) for the Centers for Medicare & Medicaid Services (CMS). In this role, she guides 200 employees to successfully achieve the strategic communication objectives to promote vital health care for the more than 90 million Medicare and Medicaid beneficiaries. Ms. Niño brings to CMS over 20 years of experience directing strategic communications and marketing initiatives. She previously served as the Director of Communications and Legislative Affairs at the National Trauma Institute in San Antonio. In addition, she worked for the San Antonio Express-News, as both Director of Community Relations and Director of Marketing. She was the Director of Marketing and Business Development for the Greater Kelly Development Authority. During the Clinton Administration, Ms. Niño served as DHHS Secretary Shalala's Director of Outreach, where she was highly involved with various interagency and White House Committees, including the Interagency Committee on Persian Gulf Mystery Illnesses, the Environmental Justice Committee, the White House Initiative on Educational Excellence for Hispanics, and the White House Executive Order on Historically Black Colleges and Universities (HBCUs). She also worked with the Health Care Financing Administration (now CMS). Ms. Niño launched her journalism career in 1986 as a TV Reporter. In 1989, she assisted in the campaign that led to Chicago Mayor Richard M. Daley's election, later serving as Mayor Daley's Assistant Press Secretary.

Laura Ojeda, MPH
Ms. Ojeda is the Deputy Director for Leadership for Healthy Communities, a national program of the Robert Wood Johnson Foundation. Ojeda has worked in the field of public health in the areas of program planning, policy and evaluation for more than 12 years. Prior to joining Leadership for Healthy Communities, Ojeda served as a Program Of-
Jim Pimol, M.D., M.S.
Ms. Pimol is the Director of the Office of Tribal Self-Governance, Indian Health Service, and Department of Health and Human Services. She has primary responsibility for the Indian Self-Determination and Education Assistance Act as it pertains to health related activities affecting Tribal Self-Governance, including advocacy on behalf of American Indians and Alaska Natives on the development and implementation of federal Self-Governance policy and advancing the positions and interests of Self-Governance Tribes. She is a member of the Kiowa Tribe of Oklahoma and is also Cadno and Comanche. Ms. Pimol holds a J.D. from the University of Montana and a B.A. from the University of Oklahoma.

Brian Patterson
He serves on the Indian Oneida Indian Nation’s Men’s Council and is President of the United South and Eastern Tribes, Inc. Since 2006, Brian Patterson has served as President of United South and Eastern Tribes (USET), a national Indian organization that represents 25 tribes east of the Mississippi River. He also served as Chairman of USET’s Culture and Heritage Committee. He is a Bear Clan Representative to the Oneida Indian Nation’s Men’s Council and Clan Mothers, the tribe’s governing body, responsible for directing policy for the Oneida Indian Nation of New York. In addition, he has been active in government-to-government consultations on a variety of issues, such as the Environmental Protection Agency, the federal Advisory Council on Historic Preservation and the Fort Drum Army Base. Patterson is the father of four children.

Jim Pearson, M.Ed.
After thirty years of public health service in both governmental and academic settings, Jim is the Chief Program Officer for ASTHO’s survey research, performance improvement, workforce, and eHealth portfolio of projects. Prior to joining ASTHO, Jim was Assistant Director of the Ohio Department of Health. He led development of Ohio’s local health agency performance standards, led the department’s health policy, human resources, information technology, audit, and strategic planning and quality improvement programs, and served on the Standards Workgroup for the National Exploring Accreditation Project.

Michael Pellegrino
Mr. Pellegrino is the Outreach Director in the Grants.gov Program Management Office. In this capacity he is responsible for the Business Transformation of Grants.gov. Mr. Pellegrino is the functional lead for the Grants.gov Contact Center. He manages the functional requirements for the Grants.gov static content of the website to include Grants.gov program communications. Mr. Pellegrino was born in Philadelphia, Pennsylvania on March 16, 1966. He graduated from Drexel University in 1989 with a Bachelor of Science degree in Finance. Furthering his education, Mr. Pellegrino received his Master of Business Administration from Drexel University in 1997 with fields of concentration in Finance and Management.

Lita Pepion
Ms. Pepion studied pre-medicine and biology at the University of Portland and the University of Nevada – Reno where she received a B.S. in Biology and was selected as one of the Top Ten Senior Women. She studied medicine at the University Of Minnesota School Of Medicine in Minneapolis and completed clinical internships at Washoe Medical Center in Reno, Nevada and Indian Health Service Clinics in Nevada, South Dakota and Montana. Lita has also completed coursework toward a M.Ed. specializing in curriculum development and is a licensed Teacher in the State of Montana. She owns and operates CRI Health & Fitness, LLC; a Native American owned consulting firm providing health and fitness education, training and certifications, wellness coaching and program development services to Tribes and agencies serving Native Americans and Alaska Natives. She is a dynamic presenter as well as a certified professional rescuer, Fitness Trainer, Certified Fitness Instructor and Personal Trainer currently teaching a variety of fitness classes throughout Indian Country and at the Billings Family YMCA. Ms. Pepion is also a Master Trainer for FITOUR and faculty member of the American Council on Exercise and IDEA Health & Fitness Association member.

Petrice Post
Petrice Post has been with SPRC as a Tribal Prevention Specialist since October 2008. In this role she collaboratively provides customized, tailored technical assistance to State/Tribal communities to build and enhance their own capacities. Petrice is a strong advocate of community mobilization/development. In addition to her roles as organizer, consultant and teacher, she has knowledge and skill in program design/management, research and evaluation, working with diverse populations in rural and reservation communities on a broad range of issues, including mental health, substance abuse, family violence, and suicide. Ms. Post holds a M.A. in Applied Sociology emphasis in evaluation.

Clementine Rasheed, M.Ed.
For the past five years Ms. Clementine Rasheed has served as Director of the Morehouse School of Medicine Public Health Summer Fellows Program. Sponsored by the Department of Community Health and Preventive Medicine and the Master of Public Health Program this program has served to encourage and prepare minority students to pursue graduate studies and careers in public health by providing educational and experiential activities along with professional and practical work experience. The PHSP as founded in 1987 as a joint collaboration among the Centers for Disease Control and Prevention (CDC), Emory University Rollins School of Public Health, and Morehouse School of Medicine. Ongoing recruitment activities targets underrepresented junior and senior undergraduate students of African American, Hispanic, American-Indian and Pacific Islander descent. In her capacity as faculty, Ms. Rasheed teaches within the Master of Public Health Program.

Charles Ty Redbird
Dr. Charles Ty Redbird is a member of the Three Affiliated Tribes of North Dakota. He began his career with the United States Public Health Service Commissioned Corps in 1997 with the Whiteriver Indian Hospital. He was appointed by the Director of the IHS in 2004 as the National Chief Clinical Consultant in Internal Medicine and then participated in the planning group for the Chronic Care Initiative. He is now its Chair and works with the Indian Health System to improve the health status of patients and populations affected by chronic disease and reduce the prevalence and impact of those diseases among American Indian and Alaska Native People.

William Riley, Ph.D.
Dr. Riley is Associate Dean, School of Public Health, University of Minnesota. He has extensive experience in accreditation including the Interim CEO of the Public Health Accreditation Board (PHAB), and is currently the Vice Chair of PHAB. He has also served on committees for the National Board of Public Health Examiners. Dr. Riley has over 20 years experience as a senior health care executive and has held the position of president and CEO of several health care organizations, including an integrated delivery system; a large multi-specialty medical group; and a health plan joint venture. He is the author of numerous studies and articles related to quality control, patient safety and health care management.

Jim Roberts
James C. Roberts is a Hopi/Sioux tribal member that is enrolled with the Hopi Tribe at Shungopovi, 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 (NPAIIIB), an organization that represents 43 federally recognized tribes throughout the Pacific Northwest on health policy and budget matters. Jim works to advise federal and state governments on 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 CDC and CMS Tribal Consultation policies. He has served to support the HHS Budget Formulation Team since its inception in 1997. Jim worked with Northwest Tribal leaders to establish the CMS Tribal Technical Group by serving on the interin TTAG and now serves as a current member. Mr. Roberts facilitates state/trial relationships in Idaho, Oregon, and Washington. He has worked to get important legislation passed that benefits Tribes at the state and national levels. Prior to joining the NPAIIIB 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.

Geoffrey Robb
Mr. Robb developed the skills necessary to offer guidance and technical assistance to Tribal Colleges, Tribal governments and organizations and a variety of local agencies involved in Indian Education. He serves as a Team Leader and Education Program Specialist in the Office of Indian Education, in the US Department of Education, and as the Executive Director of the Native American Youth Association in Portland, Oregon. Mr. Robb has also been selected to serve as the President of the Board of Directors, of the National Native American AIDS Prevention Center (NNAAPC) and Chairman of the Policy Advisory Committee. He holds a BS in Educational Studies from the College of Education, University of Oregon and has taken graduate coursework at Georgetown University.

Yvette Roubidoux, MD, MPH
Dr. Yvette Roubidoux, M.D., M.P.H., a member of the Rosebud Sioux Tribe, South Dakota, is the Director of the Indian Health Service (IHS). Dr. Roubidoux was confirmed by the U.S. Senate as IHS Director on May 6, 2009, and she was sworn in on May 12, 2009. The IHS, an agency within the Department of Health and Human Services, is the principal federal health care advocate and provider for American Indians and Alaska Natives. As the IHS Director, Dr. Roubidoux administers a $4 billion nationwide health care delivery program composed of 12 administrative Area (regional) Offices. The IHS is responsible for providing preventive, curative, and continuing care to approximately 1.9 million of the nation’s 3.3 million American Indians and Alaska Natives in hospitals, clinics, and other settings throughout the United States. Dr. Roubidoux previously worked for IHS for three years as a clinical director and medical officer at the San Carlos Service Unit on the San Carlos Apache Indian reservation in Arizona, and she worked for one year as a medical officer at the Hu Hu Kam Memorial Indian Hospital on the Gila River Indian reservation in Arizona. Dr. Roubidoux recently served as assistant professor of family and community medicine at the University Of Arizona College Of Medicine. Dr. Roubidoux has conducted extensive research on American Indian health issues, with a focus on diabetes in American Indians/Alaska Natives and American Indian health policy. Dr. Roubidoux served as the co-director of the Special Diabetes Program for Indians Demonstration Projects, in which 66 American Indian and Alaska Native communities are implementing diabetes prevention and cardiovascular disease prevention initiatives. She also served as director of two University of Arizona programs designed to recruit American Indian and Alaska Native students into health and research professions. Dr. Roubidoux received her medical degree from Harvard Medical School in 1989 and completed a residency program in primary care internal medicine at Brigham and Women’s Hospital in Boston in 1992. She completed her Master of Public Health degree at the Harvard School of Public Health in 1997. She also completed the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy before transitioning to a career in academic medicine and public health. She is a past president of the American Indian Physicians and co-editor of the American Public Health Association’s book “Promises to Keep: Public Health Policy for American Indians and Alaska Natives in the 21st Century.” She has authored several monographs and peer-reviewed publications on American Indian/Alaska Native health issues, research, and policy.

Sarah Schmansky, MA
Ms. Schmansky serves as the Public Health Educator for the Indian Health Service, San Carlos Apache Reservation. Sarah has worked for Native American Programs since 1978. She specializes in serving the most underserved populations of Native Americans. Her talent is working with Native American Youth because she can relate to the issues they are faced with. She has learned that one of the most important skills to possess when serving Native Americans of all ages is that having a very soft and sensitive chair side manner. She has worked with Plains Tribes, Southwest Tribes, Northeastern Tribes and Canadian Tribes. She has extensive experience working with Native American organizations like Colorado River Indian Tribes Reservation, Montana Indian Association, Montana Indian Teacher Training Program, Browning Public Schools, University Of Great Falls, and Salish Kootenai College. She has also worked as a Head Start Teacher. Sarah graduated from the University of Great Falls and earned a Bachelor degree in Education and a Masters degree in Human Services and Alcohol/Drug Counseling. She has also served on a Hospital IRB Board in Great Falls, Montana.

Vallab (Raj) Shah, MD
Dr. Shah is Associate Professor in the department of Internal medicine and Biochemistry and Molecular Biology, School of Medicine, University of New Mexico-HSC. For more than 19 years Dr Shah has been intimately involved in a productive, well-funded, translational clinical research program focused on the molecular epidemiology of diabetes, CVD and kidney disease. In particular, he is the Program Coordinator of the Zuni Kidney Project (ZKP), ZKP-family studies (FIND consortium), Genetics of Kidney Disease in Zuni Indians (GKD3Z) and Cytokine gene polymorphism in CRIC cohort (CGP-CRIC) (All funded by NIDDK, NIH) in the Division of Nephrology at University of New Mexico. Dr. Shah is currently involved in conducting evidence based clinical/educational interventions of chronic diseases in Zuni Indians and has been supported by NCRR.

Stacey Shuman
Stacey Shuman is currently a Medicaid and CHIP Health Insurance Specialist at the CMS Dallas Regional Office. She also serves as a Native American Contact for these programs. Before joining CMS in 2005, Stacey received an AAS in Computer Science from Alvin Community College, and worked as a COBOL Programmer for American National Insurance in Galveston. In 2001 she received a BSA in HR from University of Texas-Dallas, and was employed in ITC in various facilities. Stacey also completed courses in Healthcare Administration from Wayland Baptist University, later receiving a MA from UTMD, and was awarded a Presidential Management Fellowship from the U.S. Office of Personnel Management.

Gail H. Sims, Ph.D.
Dr. Sims serves as the Director of the Wellness Center (Behavioral Health Services) at San Carlos Apache Reservation in San Carlos, Arizona. She has worked with the San Carlos Apache Tribe for the past six months. With over 30 years experience in administration of developmental and behavioral health residential services as well as directing special education programs in those settings Gail Sims possesses skills in program design and management, staff development, computer program design-specific to behavioral health programs. She has served as the chairman of the board of Howell Child Care Centers, Inc. in North Carolina. There, her leadership and strategic planning helped to develop an internationally recognized program for persons with multiple disabilities. Gail Sims received her Masters of Science degree from Central Michigan University in the department of Organization and Management. She received her Doctor of Philosophy from Capella University from the School of Business.

John Sorensen
A graduate of the University of Maryland at College Park, John has been an advocate all his life. First, for himself and later as the leader of a statewide self-advocate disability rights group known as the Cross Disability Rights Coalition (CDRC). Under his leadership CDRC became
a force at the Maryland legislature, in the State's Medicaid offices and numerous other areas affecting the lives of Marylanders with physical and developmental disabilities. Through his involvement with CDRC, John became involved in National disability policy issues. Before coming to CMS, John advocated for the policies that would later become the Money Follows the Person Demonstration to make their way through Congress. Now as a Project Officer for MFP, John oversees the MFP grant for six states and brings his background as a person with a life-long disability and Medicaid recipient to the MFP team and to CMS as a whole.

Geoffrey D. Strommer, JD
Geoffrey joined the Firm in 1992, and is managing partner of the Portland office. He represents tribal clients on a wide range of issues and is a nationally known expert on the Indian Self-Determination and Education Assistance Act (ISDEAA). Since 1992, Geoff has actively participated in the development and implementation of the ISDEAA. He has worked on efforts to draft and lobby for amendments to various titles of the ISDEAA, and he has been very involved with the development of regulations to implement Titles IV and V of Act as well as for the Indian Reservation Roads program. His work under the ISDEAA also includes negotiating contracts, compacts and annual funding agreements with the Bureau of Indian Affairs, the Indian Health Service, and other federal agencies, including in 2003 the first funding agreement with the U.S. Fish and Wildlife Service. Geoff has assisted tribal clients on a range of other legal issues, including drafting and revising constitutions, bylaws and ordinances; acquiring and placing land into trust status, including the first ever transfer of land to a tribe under the ISDEAA and the Base Realignment and Closure Act; monitoring and advocating issues related to the Department of the Interior’s reorganization efforts through lobbying activities and litigation. In 1997, Mr. Strommer was an adjunct professor of law at Northwestern School of Law at Lewis & Clark College, where he co-taught a course on federal Indian law. He has written several published articles on Indian law issues. His most recent article, co-authored with Stephen D. Osborne, is entitled “Indian Country” and the Nature and Scope of Tribal Self-Government in Alaska, and was published in the June, 2005 Alaska Law Review. He also co-authored a law review article with Craig Jacobson in 1999 entitled Indian Tribes and the Base Realignment and Closure Act: Recommendations for Future Trust Land Acquisitions, North Dakota Law Review (September 1999). Mr. Strommer received his J.D. degree from the Georgetown University Law Center in 1990, and his B.A. degree from the University of California, Berkeley (with distinction) in 1986. He is a member of the Oregon and Arizona bars.

Ileen Sylvester
Ileen Sylvester, Yup’ik, has served as the vice president of executive and tribal services for Southcentral Foundation (SCF) since 1998, working closely with the rest of the executive leadership team in the management and direction of a complex health care delivery system. She currently manages and directs the day-to-day operations of tribal relations and village initiatives for health care delivery to 55 rural villages, as well as traditional healing, youth internship and Elder programming, public relations, planning and grants, and more. In recognition of her leadership, she was inducted into the YWCA Academy of Women Achievers in 2002.

Maile Tanaitli, MPH
Dr. Maile Tanaitli is the Director of the Native Hawaiian Epidemiology Center, housed at Pape Ola Lokahi. Pape Ola Lokahi was established in 1987 by the Native Hawaiian community to improve the health status and wellbeing of Native Hawaiians. The Native Hawaiian Epidemiology Center serves the mission of Pape Ola Lokahi by providing biostatistics and epidemiological support to the Native Hawaiian Health Care Systems and the Native Hawaiian and Other Pacific Island community. Her center also provides program evaluation and quality improvement support to the Native Hawaiian and Other Pacific Islander community and their public service organizations. Prior work includes the development of the Urban Indian Health Institute, a Tribal epidemiology center house within the Seattle Indian Health Board. With an educational background in Health Services, Social and Behavioral Sciences, Public Health Informatics, and Public Health Genetics, Maile strives to support improving the health and wellness of her community.

Ronnie Tepp
Ronnie Tepp, President of Navigator Consulting, LLC, has nearly twenty years of health policy experience as a senior Congressional staff person; as a Vice President in a lobbying firm representing non-profit organizations, corporations, and academic medical centers; and most recently leading the government relations activities of a major medical research foundation. Ms. Tepp is former Director of Government Relations for the Juvenile Diabetes Research Foundation and is passionate about the incidence of diabetes in the American Indian/Alaska Native community. She has a proven record of success in achieving results. Ronnie draws on her extensive experience and knowledge and offers a range of services including developing and executing legislative strategies; creating effective advocacy materials; conducting trainings for volunteers, members and/or Boards; providing sophisticated policy research and analysis; and supplementing media efforts. She is currently a Consultant to the NIH Tribal Leaders Diabetes Committee.

Lance Tervilliger, JD
Lance Tervilliger began her career at CMS in 1993 working on MediCare Reimbursement policy. She has held several positions in CMS and has been working in Medicaid since January 2005. Lance works on Medicaid Section 1115 demonstrations and the implementation of the Deficit Reduction Act Medicaid citizenship and identity document requirement. She has a Juris Doctorate and Masters in Health Law from DePaul University, College of Law.

Judith Thierry, DO, MPH
Captain Judith Thierry, U.S.P.H.S., Maternal and Child Health (MCH) Coordinator, Indian Health Service (IHS), has worked in Indian health since 1986 and is a fellow of the American Academy of Pediatrics and American College of Osteopathic Pediatricians. Under Dr. Thierry's leadership, American Indian and Alaskan Native (AIN) women and children in over 35 reservation states, 34 urban centers and 12 IHS Area Offices benefit from MCH policy coordination on child maltreatment; psychosocial services; reproductive health and maternity care; and linkages with community health representative programs and public health nursing, MCH also addresses obesity prevention, school-based health care, and youth health promotion.

Shannon White
Shannon White is a member of the Sisseton-Wahpeton Oyate of the Lake Traverse Reservation in northeastern South Dakota. She is the Injury Prevention Specialist for her tribe, focusing on traffic safety. Ms. White graduated from the University of South Dakota in 2004 with a B.A. in Contemporary Media & Journalism/Criminal Justice. She is the Facilitator of the Community Injury Prevention Team and the American Indian Area representative on the National Tribal Steering Committee for Injury Prevention.

Donald Warner, MD, MPH
Donald Warner, MD, MPH is the Executive Director of the Aberdeen Area Tribal Chairmen's Health Board, and he is also the President and CEO of American Indian Health Management & Policy—an American Indian healthcare consulting firm. He is also an adjunct clinical professor at the Arizona State University Sandra Day O’Connor College of Law where he teaches American Indian Health Policy. Dr. Warner is a member of the Oglala Lakota tribe from Pine Ridge, South Dakota and comes from a long line of traditional healers and medicine men. He received his MD from Stanford University in 1995 and his Master of Public Health from Harvard University with a focus on health policy in 2002. Dr. Warner is a Certified Diabetes Educator (CDE), and he is a Diplomat of both the American Board of Family Practice and the American Board of Medical Acupuncture. He has completed fellowships in Alternative Medicine from the Arizona Center for Health and Medicine and in Minority Health Policy from Harvard Medical School. Dr. Warner's work experience includes several years as a primary care and integrative medicine physician with the Gila River Health Care Corporation in Sacaton, AZ, and three years as a Staff Clinician with the National Institutes of Health in Phoenix where he conducted diabetes research and developed diabetes education and prevention programs in partnership with tribes.
Selwyn Whiteskunk
Selwyn Whiteskunk, Public Health Administrator for the Ute Mountain Ute Tribe in Towaoc, CO. He is a member of the Ute Mountain Ute Tribe. His work has included working with the various Health Systems from the Federal, states, local, and Tribal Governments within the boundaries of the Ute Mountain Ute Tribal Lands which consists of Colorado, New Mexico, and Utah borders. He consults regularly with Health Executives from a variety of Health organizations to create better services, partnerships and solutions to health problems impacting Tribal citizens on the Ute Mountain Ute Tribal lands. Prior to his current position, he was elected to the Ute Mountain Ute Tribal Council for 9 years, in which he held numerous Official Positions including Tribal Chairman. Raised in Towaoc, Colorado, Selwyn now lives with his three children in Colorado. Selwyn currently serves as a board member for three Native American Health Boards; Colorado Commission on Indian Affairs Health and Wellness Committee, Albuquerque Area Indian Health Board, and Utah Indian Health Advisory Board. Mr. Whiteskunk currently serves as the Chairman for the Utah Indian Health Advisory Board. Mr. Whiteskunk is a US Army Veteran.

Priscilla Whitethorne
Ms. Priscilla “Patti” Whitethorne is a member of the Navajo Nation. Her clans are the Blackstock Wood people and Edgewater people. Ms. Whitethorne assumed her responsibilities as the Director of the Sells Service Unit (SSU) on August 9, 2004. The SSU is composed of the (base) Sells Hospital, San Xavier Health Center, Santa Rosa Health Center and the San Simon Health Center. As the SSU Director, Ms. Whitethorne has responsibility and oversight for the IHS primary care and community outreach programs on the Tohono O’odham Nation providing a comprehensive health program of patient, ambulatory, emergency room and community health services. Ms. Whitethorne, a graduate from Tuba City High School, received her BS in Dietetics, with a minor in Chemistry and a Masters of Arts in Education degree in Counseling from Northern Arizona University. She also obtained a Masters of Science degree in Health Services administration from Central Michigan University. She is a registered Dietitian.

Bryan E. Wooden
Mr. Wooden is currently serving as Deputy Director of the Division of Behavioral Health within Indian Health Service. Mr. Wooden, who is a graduate of the University of Michigan’s School of Social Work, has over 17 years of clinical social work experience. During this time, Mr. Wooden has worked as Program Manager for Community Health Awareness Group, the largest African American HIV/AIDS Community-based organization in Detroit, MI and was instrumental in establishing their first case management program. Through his private consulting firm, Wooden & Associates, Mr. Wooden has provided the delivery of HIV preventive services to such organizations as Episcopal Caring Response to AIDS and Damien Ministries. Mr. Wooden is a licensed clinical social worker, providing counseling services in the states of Michigan, Maryland, Georgia and the District of Columbia and has achieved the accreditation of Diplomat in Clinical Social Work, which is the highest accreditation for clinical social workers.

Anita Yuskavskas, Ph.D.
Anita Yuskavskas is currently the Technical Director for Quality in Home and Community Based Services with the Centers for Medicare and Medicaid Services. She was previously a Waiver Analyst at CMS and was involved with the Independence Plus Initiative and tribal issues. Preceding her federal tenure, Anita served as a Division Chief in Hawaii’s Department of Health, overseeing the developmental disabilities, Hansen’s Disease, and brain injury programs. She also served as Chief Policy Analyst for the Center for Outcome Analysis in Rosemont, Pennsylvania. Dr. Yuskavskas received her Ph.D. in Rehabilitation from Syracuse University. She conducted numerous program evaluations and qualitative research projects specializing in organizational change, and taught undergraduate and graduate courses in human services and special education. Anita previously volunteered her time as an advisor for Speaking for Ourselves, a statewide self-advocacy organization in Pennsylvania, and is a trained mediator.

Melissa Zito, MS, RN
Melissa is a registered nurse with 28 years extensive experience in critical care nursing, emergency department nursing, and community health nursing, emphasizing Ethnic Health. Ms. Zito has worked with the American Indian/Alaskan Native (AI/AN) population and community for the last 17 years. Her experience working in the AI/AN community in Utah began in 1992. She gained health policy experience working as an intern for the Utah Health Policy Commission during graduate school. Ms. Zito’s current role at the Utah Department of Health (UDOH) is Indian Health Liaison/Health Policy Consultant. Ms. Zito’s role is to work with state, tribal and federal agencies on policy reform impacting tribes, facilitate the Utah Indian Health Advisory Board, provide technical assistance where needed for the development of tribal health systems, and advise, as directed, the Governor’s Office, Utah Legislature and Utah Congressional members regarding public health policy and its implications for AI/ANs in Utah. In addition, her role includes facilitating working relationships between the UDOH, tribal health programs, local health departments and private sector providers. Ms. Zito received her undergraduate BS degrees in Nursing, from Westminster College, Salt Lake City, UT and Cultural Anthropology, Great Basin Cultures from the University of Utah. She received her MS in Nursing and Health Systems Administration from Brigham Young University, Provo UT.
CONFERENCE EXHIBITORS

AMERICAN INDIAN
AND ALASKA NATIVE
ARTISANS AND CRAFTSMEN

Native Hands - Owner: Arlene Joe
Tempe, AZ

Turquoise Wild
Albuquerque, NM

Notah's Southwest Connection
Tohatchi, NM

William Harjo Arts & Crafts
Livingston, TX

COMMERCIAL BUSINESSES
AND CORPORATIONS

American Medical Technologies
Warren, AR

Indian Country Today
Canastota, NY

Salient Corporation
Horseheads, NY

Cottingham & Butler Consulting Services
Minneapolis, MN

FEDERAL AGENCIES

Centers for Medicare and Medicaid Services (CMS)
Baltimore, MD

Food and Drug Administration
Office of Women's Health
Rockville, MD

National Institute of Arthritis & Musculoskeletal and Skin Disease
Rockville, MD

National Library of Medicine
Bethesda, MD

Office of Minority Health-Resource Center
Rockville, MD

Social Security Administration
Baltimore, MD

Substance Abuse & Mental Health Services Administration
Rockville, MD

United States Census Bureau
Washington, DC

TRIBAL GOVERNMENTS,
PROGRAMS, AND BUSINESSES

United South and Eastern Tribes, Inc.
Nashville, TN

Prairie Band Potawatomi Health Services
Mayetta, KS

Managed Business Solutions
Colorado Springs, CO

NON-PROFIT ORGANIZATIONS

Academy for Educational Development
Washington, DC

American Diabetes Association
Alexandria, VA

U.S. Environmental Protection Agency - Tribal Indoor Air Quality
Washington, DC

Education Development Center
Newton, MA

Mayo Clinic: Spirit of Eagles
Rochester, MN

National Council of Urban Indian Health
Washington, DC

National Native American AIDS Prevention Center
Denver, CO

Patient Advocate Foundation
Newport News, VA

Self-Governance Communication & Education
Ferndale, WA

UNIVERSITIES &
EDUCATIONAL INSTITUTIONS

Grand Canyon University
Phoenix, AZ

United Tribes Technical College
Bismarck, ND

NIHB GRANTEES

Indian Health Service
Meth and Suicide Program for Indians

Indian Health Service
Diabetes Division

Public Health Accreditation Board
Robert Wood Johnson Foundation
HOTEL INFORMATION

Hyatt Regency Washington, D.C. On Capitol Hill
400 New Jersey Avenue, NW, Washington, DC, 202-737-1234

CHECK-IN/CHECK-OUT TIME
Check-In time at Hyatt Regency Washington ("Hotel") is 3:00 pm. Room assignments prior to that time are on an availability basis. On the date of arrival, guests can call 1-800-CHECKIN (1-800-243-2546) to pre-register at the Hotel. The Hotel check-out time is 12:00 pm. Video check-out is available in all guest rooms for your convenience.

GUARANTEE POLICY
The Hotel requires that all reservations be guaranteed either by a credit card (American Express, Carte Blanche, Diners Club, Discover, JCB, MasterCard, Visa) or by a cash/check deposit for one nights room and tax. Guarantee/Deposit will not be refunded unless the reservation is canceled more than 72 hours in advance.

EARLY DEPARTURE FEE
An early departure fee equal to one night’s room and tax will be assessed to any guest who departs earlier than the date confirmed at check-in. The fee will be posted automatically to the guest folio on or after departure. Emergency or special circumstance situations will be reviewed on a case by case basis.

PARKING
The Hotel has valet parking available on the premises. The current rate is $41.00 per night, with in and out privileges; price subject to change. Additionally, there are a number of nearby parking facilities, which may be used as overflow. The height clearance in our garage is 6 feet.

The hotel does not have any designated areas for bus or trailer parking. Please contact your Catering/Convention Services Manager with specific questions or additional information. Please note that there are a limited number of spaces for vans and oversized vehicles. The parking charge for these vehicles is currently $48.00 per night.

FAX NUMBERS
Guest Fax located in the Business Center (to/from in-house guests and attendees) 202-719-8700
Reservations Fax (to make/change/cancel reservations) 202-719-8457
Executive Offices Fax (Sales/Catering/Convention Services/Accounting) 202-719-8419

SERVICES AVAILABLE
Your Catering/Convention Services Manager will be happy to provide details about all the great services available at the Hyatt Regency Washington. Be sure to ask about our Business Center, Health Club & Swimming Pool, Gift Shop, Regency Club, and our Restaurants & Lounges.

CONFERENCE INFORMATION
TRANSPORTATION
See the Metro map. The mass transit system is convenient for your travel. Taxis are available at the entry of the hotel.

AGENDA CHANGES
Changes to the conference agenda will be posted daily by the registration desk located in the foyer of the lower floor of the Hyatt. Additionally, each meeting room has a screen that identifies the session name and times. NIHB reserves the right to change the agenda without notice.

CONFERENCE BADGES
Official National Indian Health Board 26th 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 in the foyer of the lower floor of the Hyatt.

*Special name badges issued to exhibitors grant access to the exhibit area, opening reception and Culture Night only.

REGISTRATION
The registration desk will be open throughout the conference to meet your conference and informational needs and is located in the lower level foyer of the Hyatt.

HOURS
Monday, September 14 1:00 pm – 5:00 pm
Tuesday, September 15 7:00 am – 5:00 pm
Wednesday, September 16 7:00 am – 5:00 pm
Thursday, September 17 7:00 am – 3:00 pm

QUESTIONS AND INFORMATION
NIHB Board members, Staff and Volunteers will be wearing White shirts with the NIHB Red Feather logo and/or will have a staff ribbon on their name tag. We are here to help you and make your conference visit a memorable one.

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 requests 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.

HAVE A WONDERFUL CONFERENCE!
Flyatt Regency, Washington, D.C.
On Capitol Hill

DIRECTIONS
From Dulles Airport: Take the George Washington Expressway to I-95 North to "H" Street in Washington, D.C. Take the bridge to the key center to make a left at the end of the bridge. Then take I-95 North. Take the 15th Street South exit. Stay in the right lane as you go through two roundabouts. In the second roundabout, take exit for 15th Street. Make a right at the end of the roundabout. Turn left at 2nd Street onto New Jersey Avenue. The hotel is on the left.

From Reagan International Airport: Take the Dulles Toll Road to I-95 South to "H" Street in Washington, D.C. Take the 15th Street South exit. Follow Constitution Avenue East toward the U.S. Capitol. At the second roundabout, make a left onto Constitution Avenue. Proceed on this road, make a right onto New Jersey Avenue. The hotel is on the left.
REPORT
National Center on Minority Health and Health Disparities (NCMHD)
National Institutes of Health (NIH)
Office on Rural Health Policy (ORHP)

Fact-finding Workshop on “Rural Health Disparities”
July 30-31, 2009, Washington, DC

A fact finding workshop on “Rural Health Disparities” took place on July 30-31, 2009 in Washington, DC, co-sponsored by the National Center on Minority Health and Health Disparities (NCMHD) and the Office on Rural Health Policy (ORHP). NCMHD and ORHP co-sponsored this workshop to advance the common goal of eliminating rural health disparities. This meeting brought together a diverse group of experts in the fields of science, practice, and policy, which included academic experts, non-profits and other federal agencies. The objective of the workshop was to:
1. Understand best practices in addressing rural health disparities;
2. Recognize research gaps in rural health disparities;
3. Identify opportunities for scientific innovations to eliminate rural health disparities.

Preliminary recommendations offered by the participants in the workshop included:

> To support innovations related to:
  - Workforce
  - Partnerships with the Private Sector and Respected Leaders to develop community-based interventions
  - Underrepresented topics such as social determinants of health;
  - Emerging populations such as refugee and indigenous farmworkers;
  - Improving research infrastructure in rural communities;
  - Establishment of a Center for Farmworker Health.

> To fill research gaps related to:
  - Data collection;
  - Workforce research funding;
  - New models for healthcare delivery;
  - Qualitative research to broaden methodological approaches to include culture and values;
  - Underrepresented populations such as migrant and American Indian populations.

> To replicate and expand upon best practices related to:
  - Exemplary data collection efforts that can be found in a diversity of programs and settings;
  - Workforce and pipeline training programs such as Alaska’s model-dental hygiene, West Virginia’s healthcare professional pipeline efforts, and community health worker training initiatives.
  - Networks and partnerships that bridge local organizations and reach out to state and national agencies;
  - Telehealth/telemedicine such as the New Mexico model and health IT for mobile populations (e.g., migrant farmworkers);
  - Patient-centered health care homes;
  - Specialty services such as oral health, behavioral health, mobile clinics and services, rehabilitation for seniors, school health;
  - Reimbursement models.

For questions regarding the Fact-finding Workshop on “Rural Health Disparities” please contact Dr. Irene Dankwa-Mullan (NCMHD Program Officer) at dankwamullani@mail.nih.gov or Ms. Ligia Artiles (NCMHD Program Analyst) at artilesl@mail.nih.gov
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Thank you for helping to make the 2009 NIHB 26th Annual Consumer Conference a Success!

National Indian Health Board

See you next year...

September 21-23, 2009

27th Annual Consumer Conference