Health, Hope, & Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health
WELCOME To Anchorage

NATIONAL INDIAN HEALTH BOARD

28th Annual Consumer Conference
September 26, 2011

Dear Friends and Colleagues:

On behalf of the entire National Indian Health Board, I would like to extend a very warm welcome to our 28th Annual Consumer Conference! NIHB is honored to be in breathtaking Anchorage, Alaska this year. I want to thank the Alaska Native Health Board for their help in hosting us, as well as Alaska Native villages throughout the state for welcoming us to their homeland.

The theme for this year’s conference is Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health! As innovations in health care policy, delivery, and education continue, we are bringing Tribal leaders, National policy and lawmakers, Tribal health administrators, Area Indian Health Boards, health care professionals and patients together to discuss successes, challenges, opportunities, and the future of health care for American Indian and Alaska Native (AI/AN) people.

The conference is also an opportunity to honor those heroes in Native health who are making strides every day for the benefit of Indian Country. These include professional athletes like our Keynote Speakers, 2011 Iditarod winner, John Baker and U.S. Olympic snowboarder, Callan Chythlook-Sifsof. As well, they include Native leaders who have to travel far from home to make policy impacts in health care delivery, health education and their family members. Their stories are inspirational and continue to demonstrate that achievements can be made in the face of adversity. As we work to make progress in improving the health of America’s first people, we must also always remember those whose work has advanced us to where we are, like Fort Peck Tribal Councilman and health care warrior Darryl Red Eagle, who walked on this year; and those who will become the next generation of heroes, like the youth who are participating in the NIHB Native Youth Health and Wellness Track during this conference.

Thank you for attending the 28th Annual Consumer Conference. I hope that this week’s events are informative, engaging, and most of all, motivating and inspiring. On behalf of our Board, I wish everyone a successful time in Anchorage.

Yours in Health,

Cathy Abramson
Chairperson
National Indian Health Board
**NIHB BOARD MEMBERS**

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Cathy Abramson  
Bemidji Area  
(Saulte Ste. Marie Chippewa)  
Councilwoman, Board of Directors

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Vice President, Salt River Pima – Maricopa Indian Community Tribal Council

Tuscon Area Representative – Currently Vacant
Stacy A. Bohlen  
(Sault Ste. Marie Chippewa)  
Executive Director, Media Contact  
sbohlen@nihb.org  
Phone: 202-507-4070

Evangelyn Dotomain, MBA  
(Cupik/Inupiaq)  
Deputy Director  
edotomain@nihb.org  
Phone: 202-507-4074

Jennifer Cooper, JD, MPA  
(Seneca Nation of Indians)  
Legislative Director  
jcooper@nihb.org  
Phone: 202-507-4076

Liz Malerba  
(Mohican)  
Legislative Assistant  
lmalerba@nihb.org  
Phone: 202-507-4082

Carolyn Angus-Hornbuckle, JD  
(Mohawk)  
Law Fellow  
chornbuckle@nihb.org  
Phone: 202-507-4084

Tyra Baer  
(Northern Cheyenne)  
Medicare/ Medicaid Project Assistant  
tbaer@nihb.org  
Phone: 202-507-4077

Doneg McDonough  
Consultant on Health Reform Implementation  
dmcdonough@nihb.org

Paul R. Allis, BSW, MEd  
(Poole Tribe)  
Public Health Project Manager  
pallis@nihb.org  
Phone: 202-507-4085

Blake Harper, MPH  
Public Health Project Coordinator  
bharper@nihb.org  
Phone: 202-507-4081

Bryce Roth  
(Hunkpapa Lakota Sioux)  
Office Assistant  
broth@nihb.org  
Phone: 202-507-4089

Tom Kauley  
(Kiowa)  
AI/AN National HITECH REC Director  
tkauley@nihb.org  
Phone: 202-507-4078

Shawn Leckey  
(Rosebud Sioux Lakota Nation)  
AI/AN National HITECH REC Deputy Director  
sleckey@nihb.org  
Phone: 202-507-4079
Welcome Friends, Colleagues, and Supporters!

On behalf of the Alaska Native Health Board (ANHB), I extend a heartfelt welcome to all our guests attending the National Indian Health Board’s (NIHB) 28th Annual Consumer Conference. In what will undoubtedly be a time of shared knowledge and experience, we look forward to working together and learning from each other during your time in Alaska.

For this year, NIHB has chosen the theme of *Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health!* With the tremendous volume of legislative and regulatory changes underway at both federal and state levels, this year’s theme reflects a shared desire and renewed commitment to the fundamental values and core beliefs of bringing health and well-being to all our people.

The uncertainty emanating from Washington and state capitolis across the nation has fostered an environment in which a theme of *Health, Hope, and Heroes* may seem out of place. However, it is precisely in this environment that the theme becomes most vital; heroes are not made and hope is not scarce when ‘times are good.’

As we share best practices and work to appreciate mutual concerns, let us do so in a manner that recognizes the reality of these times, yet not succumb to its temptations of pessimism and cynicism.

Internally, there is no escaping that we, as a system, must learn to do more with less and redouble our efforts to create efficiency and value throughout the care continuum. But equal to this effort must be the unified voice that federal obligations and the Trust Responsibility are not rhetorical devices and are not subject to austerity measures and fiscal reductions. Even among our strongest supporters and friends, the conflict between decisions made from conscience and those of convenience will become more commonplace as programs and funding levels are reduced.

Understanding this, I thank you for your work this week and your ongoing commitment to our shared goal of ensuring the health and well-being of this generation and of those to come.

Lincoln Bean, Sr.
Chairman, Alaska Native Health Board
Lincoln Bean, Sr., Chairman, ANHB
Alaska Native Tribal Health Consortium

Andrew Jimmie, Vice-Chairman, ANHB
Tanana Chiefs Conference

Emily Hughes, Secretary, ANHB
Norton Sound Health Corporation

Lorraine Jackson, Treasurer, ANHB
Copper River Native Association

Bill Kristovich, 1st At Large, ANHB
Yukon Kuskokwim Health Corporation

Sue Ann Lindoff, 2nd At Large, ANHB
SouthEast Alaska Regional Health Consortium

Rosalie Tepp, 3rd At Large, ANHB
Kenaitze Indian Tribe

William Smith, Alternate, ANHB
Valdez Native Tribe

Mike Zacharof
Aleutian Pribilof Islands Association, Inc.

Allen Upickson
Arctic Slope Native Association

H. Sally Smith
Bristol Bay Area Health Corporation

Patrick Anderson
Chugachmiut

Lona Marioncaux-Ibanitoru
Council of Athabascan Tribal Governments

Joe Bereskin
Eastern Aleutian Tribes

Alicia Reft
Karluk IRA Tribal Council

Cecelia Johnson
Ketchikan Indian Community

Andy Teuber
Kodiak Area Native Association

Robert Sampson
Maniilaq Association

Solomon D. Atkinson
Metlakatla Indian Community

Larry Sinyon
Mt. Sanford Tribal Consortium

Violet Rice
Native Village of Eklutna

Donna Bartels
Native Village of Tyonek

Janet Mullen
Ninilchik Traditional Council

Beckie Noble
Seldovia Village Tribe

James Segura
Southcentral Foundation
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**NATIONAL INDIAN HEALTH BOARD**

**28th Annual Consumer Conference**
What is the National Indian Health Board?

Our Vision: The National Indian Health Board advocates on behalf of all Tribal Governments, American Indians and Alaska Natives in their efforts to provide quality health care for ALL Indian People!

What is the National Indian Health Board?

The National Indian Health Board (NIHB) is a 501(c)3 not for profit, charitable organization providing health care advocacy services and provides timely information and other services to all Tribal Governments. Whether Tribes operate their own health care delivery systems through contracting and compacting or receive health care directly from the Indian Health Services (IHS), NIHB is their advocate. NIHB also conducts research, provides policy analysis, program assessment and development, national and regional meeting planning, training, technical assistance programs and project management. These services are provided to Tribes, area Health Boards, Tribal organizations, federal agencies, and private foundations. The NIHB presents the Tribal perspective while monitoring, reporting on and responding to federal legislation and regulations. It also serves as a conduit to open opportunities for the advancement of American Indian and Alaska Native health care with other national and international organizations, foundations corporations and others in its quest to build support for, and advance, Indian 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 39 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 health care management. The NIHB brings to Tribal governments timely information to assist tribes to effectively make sound health care policy decisions.

Our Board of Directors

Because the NIHB represents all federally-recognized tribes, it is important that the work of the NIHB reflect the unity and diversity of Tribal values and opinions in an accurate, fair, and culturally-sensitive manner. This objective is accomplished through the work of the NIHB Board of Directors and Area Health Boards. The NIHB is governed by a Board of Directors consisting of representative from each of the twelve IHS Areas. Each Area Health Board elects its representative and an alternate to sit on the NIHB Board of Directors. In Areas where there is no Area Health Board, Tribal governments choose a representative. The Board of Directors elects an Executive Committee comprised of a Chairman, Vice-Chairman, Treasurer, and Secretary who serve two-year appointments with staggered terms and a Member-at-Large who serves a one-year term. The Board of Directors meets quarterly.
Dear Friends:

We are excited to welcome you to Anchorage, Alaska for the 28th Annual Consumer Conference presented by the National Indian Health Board. This year the conference theme is "Health. Hope. and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health."

This conference gives us the opportunity to look back and celebrate the many dedicated individuals across Indian Country whose tireless efforts serve to advance and improve the quality of health of American Indians and Alaska Natives, as well as to look forward to see where we can continue to improve and expand our efforts.

Last month we were fortunate to have Secretary Kathleen Sebelius of Health and Human Services, and the Director of the Indian Health Service, Dr. Yvette Roubideaux, join us in Alaska to witness firsthand the incredible success in self-determination Alaska Natives have achieved in healthcare by taking over programs once delivered by the federal government. Under the leadership of Alaska Native people we continue to see improved health care outcomes across the State.

I am delighted to welcome so many Tribal leaders, advocates, and healthcare professionals to Anchorage, our State’s largest Native community, for such an inspiring event. As a member of the Senate Committees on Indian Affairs, Appropriations, and Health, Education, Labor, and Pensions. I will continue to work diligently on your behalf to ensure that the federal government honors its obligations and commitment to improve the health of America’s first peoples.

I thank you and commend each and every one of you for your continued commitment and advocacy on behalf of the Native people and communities of Alaska and all of Indian Country. I hope you have a fun and rewarding conference that renews your spirit and revitalizes your energy.

Sincerely,

Lisa Murkowski
United States Senator
Dear Friends:

It is a great pleasure to welcome you to Anchorage’s Dena’ina Civic & Convention Center and to the National Indian Health Board 28th Annual Consumer Conference. It is an exciting time to be gathering, as the Indian Health Care Improvement Act is just starting to go into effect.

As you know, the theme for this year’s conference is “Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health.” This is an excellent opportunity to honor those who work every day to advance the health of Alaska Natives and American Indians, and is also an opportunity to focus on the effective implementation of the new law’s many provisions. We now have an opportunity to increase care for the young and the elderly, recruit and retain qualified health care professionals, expand mental and behavioral health programs, and continue to develop innovative health care facilities.

I am pleased you have gathered in Anchorage for such an important event. I hope you have the chance to get out and enjoy some of the beauty and hospitality of our great city and state.

I wish you the best for a successful conference as we continue to work to improve the health and well-being of American Indian and Alaska Native people. Thank you for the work you do in promoting the spiritual, physical, and mental well-being of America’s first people.

Sincerely,

Mark Begich
United States Senator
August 30, 2011

Dear Friends,

It is my pleasure to welcome you to Anchorage, Alaska and to the National Indian Health Board 28th Annual Consumer Conference. I wish you a successful conference and hope you enjoy your time here in our great state.

The theme for this year’s conference is “Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health.” In the wake of the Permanent Reauthorization of the Indian Health Care Improvement Act in 2010, this year’s ACC is a chance to honor those heroes in Indian Country who helped to get us here and work tirelessly every day to advance the health of Alaska Natives and American Indians. It is also an opportunity to look forward and learn more about the implementation of this legislation, and other timely issues affecting Indian Health.

As Chairman of the Subcommittee on Indian and Alaska Native Affairs, I recognize the constant need for innovative health care solutions in the Alaska Native and American Indian community. I maintain the belief that any future health care reforms must address accessibility, portability, and affordability. In that regard, I thank the health care professionals honored at this year’s conference, and look forward to future successes.

It is heartening to know that hundreds of Native leaders, healthcare providers, and supporters of Indian Health are gathered in Anchorage for such an exciting event. I commend the work of all attendees and the work of the National Indian Health Board in pursuit of health parity for all Alaska Natives and American Indians.

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.

Sincerely,

DON YOUNG
Congressman for Al Alaska
SPECIAL RECOGNITION:
Tierney Lancaster
Fannon Fine Printing

CONFERENCE BADGE SPONSOR:
The State of Alaska Tobacco Prevention
and Control Program
Anchorage, Alaska

CONFERENCE SPONSOR:
Centers for Medicare & Medicaid Services
Tribal Affairs Group
Baltimore, Maryland

CULTURE NIGHT SPONSOR:
Alaska Native Health Board
Anchorage, Alaska

The Alaska Native Health Board (ANHB), established in 1968, is recognized as the statewide voice on Alaska Native health issues. The purpose of the Alaska Native Health Board is to promote the spiritual, physical, mental, social, and cultural well-being and pride of Alaska Native people. ANHB is a 25-member board entity, consisting of one elected or selected representative of the Board of Directors or health committees of Alaska’s Native regional health organizations and independent tribal public law 93-638 compactors/contractors. For more information, visit www.anhb.org.

YOUTH & ADULT WALK BAG DONATION:
NIKE N7

Nike N7 is our commitment to bring sport and all of its benefits to Native American and Aboriginal communities in the USA and Canada. Through activity, competition and play you can unleash the power of your generation. You can grow up active and healthy. Sport gives you self-confidence, enabling you to be a force for positive change in your community. When one generation realizes its potential, future generations are much stronger for it. For more information, visit www.niken7.com

CONFERENCE SPONSOR:
Centers for Medicare & Medicaid Services
Tribal Affairs Group
Baltimore, Maryland

The CMS Tribal Affairs Group provides Agency-leadership in the development and enhancement of the government to government relationship with Tribes; serves as a liaison and an internal resource for Tribal leaders, Indian health programs and beneficiaries, and other Federal agencies in regards to AI/AN health issues and CMS programs; and promotes Agency’s policies and activities to improve the health care status of AI/ANs.

CONFERENCE AFFILIATE:
Alaska Native Tribal Health Consortium
Anchorage, Alaska

The Alaska Native Tribal Health Consortium is a not-for-profit tribal health organization managed by Alaska Native tribal governments and their regional health organizations. We provide statewide services in specialty medical care; construction of water, sanitation and health facilities; community health and research; information technology and professional recruiting. The Consortium

Health, Hope, & Heroes
was created in 1997 to provide statewide Native health services. For more information, visit www.anthc.org.

**Bristol Bay Area Health Corporation**

*Dillingham, Alaska*

The Bristol Bay Area Health Corporation (BBAHC) was formed by Bristol Bay tribes in 1973 to provide health services to residents of Southwest Alaska. BBAHC now serves 34 villages and employs over 360 health care professionals. BBAHC remains dedicated to the vision of our founders, providing quality health care with competence, a caring attitude, and cultural sensitivity. For more information, visit www.bbahc.org.

**Hoche Diagnostics USA**

*Indianapolis, Indiana*

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. For more information, visit www.rochediagnostics.us.

**Alaska Mental Health Trust Authority**

*Anchorage, Alaska*

The Alaska Mental Health Trust Authority is a state corporation that administers the Mental Health Trust, a perpetual trust managed on behalf of people with mental illness, developmental disabilities, chronic alcoholism and other substance related disorders, Alzheimer’s disease and related dementia, and traumatic brain injury. The Trust operates much like a private foundation, using its resources to fund projects and activities that result in long-term system change and to ensure Alaska has a comprehensive mental health program that improves the lives and circumstances of Trust beneficiaries.

**FRIENDS OF NIHB:**

**Hobbs Straus Dean & Walker LLP**

*Portland, Oregon*

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.

**SUPPORTER OF NIHB:**

**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.

**Ahna Engineering Services, LLC**

*Anchorage, Alaska*

Ahna Engineering Services, LLC, is a wholly owned subsidiary of Ahna, Inc., an Alaska Native Regional Corporation with an 8(a) certification from the Alaska District of the Small Business Administration. Ahna is an established self-performing design-build contractor specializing in managing time-sensitive, complex, and multifaceted environmental, architectural/engineering, construction, and professional services activities. Delivering high quality and responsive services since 2003, Ahna has performed hundreds of federal construction projects for repeat clients including the Alaska Army National Guard, Federal Aviation Administration, Social Security Administration, Air Force Center for Engineering and the Environment (AFCEE), and the US Army Corps of Engineers. Our multi-disciplinary core staff of over 250 professionals includes scientists, engineers and architects, as well as construction supervisory and craft personnel with decades of experience. We offer Program and Project Management staff who maintain various levels of professional developmental certifications including multiple state licenses and registrations, Project Management Institute PMP certifications, and LEEDTM Accreditation through the United States Green Building Council. For more information, visit www.ahnaes.com.
PRE CONFERENCE ACTIVITIES

SUNDAY, September 25, 2011
12:00 pm – 5:00 pm
Tikahtnu A
NIHB Board of Directors Meeting

MONDAY September 26, 2011
9:00 am – 12:00 pm
Tikahtnu D
Tribal Listening Session on the National Vaccine Plan
The National Vaccine Plan provides a framework, including goals, objectives, and strategies, for pursuing the prevention of infectious diseases through immunizations.
Hosted by the National Vaccine Program Office (NVPO), Department of Health and Human Services

1:30 – 4:30 pm
Tikahtnu E
Tribal Consultation on Health Resources and Services Administration (HRSA) Consultation Policy
This face-to-face tribal consultation is an opportunity for Tribal Leaders to provide input on HRSA’s Tribal consultation policy.
Hosted by the Health Resources and Services Administration (HRSA)

5:30 – 7:00 pm
Idlughet 1
Welcome Reception Sponsored by Alaska Native Health Board
Exhibit Booths Open

12:00 Noon – 5:00 pm
3rd Floor Foyer
Conference Registration Open
TUESDAY, SEPTEMBER 27, 2011

7:00 am – 5:00 pm
3rd Floor Foyer
Registration

7:00 am – 5:00 pm
Idulghet 2 & 3
Exhibits Open

7:00 – 8:30 am
3rd Floor Foyer
Continental Breakfast Served

8:00 – 8:15 am
Tikahtnu Ballroom A & B
Opening Ceremony/Prayer Procession
• National Indian Health Board, Board of Directors
• Presentation of the Colors by Alaska Native Veterans
• Opening Prayer

8:15 – 8:40 am
Tikahtnu Ballroom A & B
Opening Remarks and Welcome
• Buford Rolin, NIHB Nashville Area Representative, NIHB Vice-Chairman and Chairman of the Poarch Band of Creek Indians
• H. Sally Smith, NIHB Alaska Area Representative, NIHB Secretary and Chairperson, Bristol Bay Area Health Corporation
• Lincoln Bean, Chairman, Alaska Native Health Board
• Andy Teuber, Chairman, Alaska Native Tribal Health Consortium

8:40 – 8:45 am
Tikahtnu Ballroom A & B
Special Videotaped Greeting from U.S. Department of Health and Human Services Secretary Kathleen Sebelius

8:45 – 9:15 am
Tikahtnu Ballroom A & B
Keynote Address: Health, Hope and Heroes in Indian Country
• John Baker (Inupiaq), 2011 Iditarod Sled Dog Race Champion & Motivational Speaker

9:15 – 9:45 am
Tikahtnu Ballroom A & B
Keynote Address: Indian Health Service Update
• Yvette Roubideaux, MD, MPH, Director, Indian Health Service

9:45 – 10:00 am
Tikahtnu Ballroom A & B
Native Youth Summit Presentation
Native Youth attending the Annual Consumer Conference Youth Track will provide a recap of their activities.

10:00 – 10:20 am
Tikahtnu Ballroom A & B
White House Office of Public Engagement
• Charles Galbraith, Associate Director, Office of Public Engagement, The White House

10:20 – 10:30 am
Tikahtnu Ballroom A & B
"Bringing Back Smiles" Video by the W.K. Kellogg Foundation on the Alaska Dental Health Aide Therapy Program
• Valerie Davidson, Chair, CMS Tribal Technical Advisory Group; Senior Director, Legal and Intergovernmental Affairs, Alaska Native Tribal Health Consortium

10:30 – 10:45 am
Tikahtnu Ballroom A & B
Update on Secretary’s Tribal Advisory Committee (STAC)
In late 2010, HHS Secretary Kathleen Sebelius created the Secretary’s Tribal Advisory Committee (STAC), the first tribal advisory committee established to advise the Secretary in the history of HHS. The Committee is comprised of one primary representative from each of the twelve areas of the Indian Health Service (IHS), as well as five at-large national representatives. The STAC’s primary purpose is to seek consensus, exchange views, share information, and provide advice and/or recommendations, or facilitate any other interaction related to intergovernmental responsibilities or administration of HHS programs, including those that arise explicitly or implicitly under statute, regulation or executive order.
Dena'ina Center: Tikahtnu

12:30 pm – 2:00 pm
Tikahtnu Ballroom A & B
Brown Bag Lunch: Health Information Technology (HITECH) and Electronic Medical Records Luncheon, Briefing and Question and Answer Period

Gain HITECH knowledge and meet the experts who are pioneering a national Tribal effort to support and achieve the implementation and adoption of a Tribal Electronic Health Record (EHR) system. We will walk you through our digital world to help you better understand EHR support and adoption Meaningful Use (MU) from the perspectives of the NIHBM Regional Extension Center for Tribal Health Information Technology. This session, including a virtual tour in the world of EHR, will help you better understand EHR and we hope it will inspire you to join our efforts by getting involved and becoming a part of a new community to support health, healing, and hope in your community by being the “1” in Health “IT”.

MODERATOR:
• H. Sally Smith, Secretary, NIHBM (Alaska) and Chairman, Bristol Bay Area Health Corporation

PRESENTERS:
• Tom Kauley: HITECH REC Acting Director, NIHBM
• Shawn Leckey: HITECH REC Deputy Director and Content Relationship Management (CRM) Administrator, NIHBM
• Byron Jasper: REC EHR Clinical Champion and National RPMS Program, United South and Eastern Tribes
• Vicki French: REC National Meaningful Use and CRM Lead, United South and Eastern Tribes
• Tamara Dietrich: REC Manager and CRM Lead, Alaska Native Tribal Health Consortium
• Rosario Arceola Pro: REC Manager and CRM Lead, National Commercial off the shelf Program, California Rural Indian Health Board

WORKSHOP SESSION 1 2:00 – 3:30 PM

Dena’ina Center: Tikahtnu C

1. An Alaska Native Solution to Expanding Access to Oral Health Care in the U.S.

MODERATOR:
• Val Davidson, Senior Director of Intergovernmental Affairs, Alaska Native Tribal Health Consortium

PRESENTERS:
• Alice Warner-Melhorn, Ph.D, Program Officer for the W.K. Kellogg Foundation
• Mary Willard, DDS, Dental Health Aide Therapist Training Director, Bethel, Alaska
• Terry Batchler, DDS, MBA, Faculty, University of Colorado’s Center for American Indian/Alaska Native Health
The state of oral health among American Indians and Alaska Natives (AI/ANs) is unacceptable. For children, the situation is particularly severe. AI/AN children between the ages of 2 and 4 have the highest rate of decay in the U.S. five times the national average. Alaska Native villages found a global solution to this community problem and sent 18 students to New Zealand to become Dental Therapists. This session will describe this approach in Alaska, and the current movement with the support of the W.K. Kellogg Foundation and other partners – to address oral health disparities in Indian Country beyond Alaska.

Dena'ina Center: Tikahtnu D

2. The Implications of National Health Reform for the Indian Health Service and Tribally operated Health Care Systems

MODERATOR:
• Dee Sabattus, Policy Analyst, United South and Eastern Tribes, Inc. (USET)

PRESENTERS:
• Diddy Nelson, Executive Director, Oklahoma City Area Inter-Tribal Health Board (OCAITHB)
• Jim Roberts, Policy Analyst, Northwest Portland Area Indian Health Board (NPIAHB)
• Jim Crouch, Executive Director, California Rural Indian Health Board, Inc. (CRIHB)

The panel will present a broad overview of the Affordable Care Act (ACA) focusing on current and future impacts on Indian Country. The ACA was signed into law on March 23, 2010 resulting in immediate changes in the regulation of the personal health care insurance market, expansions of certain benefits for elders and new public health programs. Over the next two years even more dramatic change will occur as a series of new institutions are created to manage the insurance markets, to expand access to care, improve quality and cut costs. This workshop will explain the overall structure of the ACA, identify its impacts on Indian Country, and look at opportunities for Tribes and Tribal organizations to expand their roles in these new forums.

Dena'ina Center: Tikahtnu E

3. Examining the Sexual and Commercial Exploitation of Native Women and Children

PRESENTERS:
• Sherry Sanchez-Tibbetts, JD, Executive Director, American Indian Community Housing Organization, Duluth, Minnesota
• Bree Bussey, Coordinator, Dabinoo’igan Shelter, Duluth, Minnesota

This workshop will discuss and examine the commercial sexual exploitation of Native American women and children from the perspective of an urban Indian organization. Historical trauma and multi-generational grief and loss, compounded by high rates of poverty and sexual violence make American Indians extremely vulnerable to sexual predators. Participants will increase their understanding of the dynamics of sexual exploitation of Native women and the importance of addressing the issue across multiple systems.

Dena'ina Center: Kahtnu 1

4. Techniques for Optimizing Success: How Fetal Alcohol Spectrum Disorders (FASD) Co-Occur with, or are Misdiagnosed as Attention Deficit Hyperactivity Disorder, Autism, Oppositional Defiant Disorder, Conduct Disorder or other Psychiatric Disorders.

PRESENDER:
• Candace Shelton, Senior Native American Specialist

Individuals who have been prenatally exposed to alcohol often have mental health issues in addition to the cognitive and behavioral problems that typically manifest due to subsequent brain damage. Co-occurring disorders is the rule rather than the exception for individuals with FASD. Often the FASD goes unrecognized and undiagnosed due to the fact that the behaviors clinically observed look very much like the behaviors seen in psychiatric disorders. However, in the case of FASD, the behaviors are due to the way the brain processes information and not due to willful decisions. This interactive workshop with examine and differentiate the common misdiagnosis of co-occurring disorders and present strategies for improving outcomes for individuals who have a fetal alcohol spectrum disorder.

Dena'ina Center: Kahtnu 2

5. Navajo Diabetes and Food and Nutritional Terminology Project

MODERATOR:
• Randall Comb, Training Instructor, Navajo Nation Special Diabetes Project for Indians

PRESENDER:
• Ray B. Louis, Public Information Officer, Navajo Nation Special Diabetes Project for Indians

The Navajo Nation has developed the Navajo Terminology for Diabetes and Food and Nutrients Translation/ Interpretation Project. This workshop will highlight and address the usage of tribal values and knowledge in standardizing medical and nutrient terminology in the Navajo Language. The terminology project focused on providing a comprehensive, culturally competent, community-based system that serves the needs of the individual and health care providers to promote
quality language translation and interpretation services on health care delivery services. It is through this project model that all other tribes can have the pathway to create their own diabetes and nutrition terminology in their own native language.

Dena’ina Center: Tubughenq’ 3
6. Successful Connections & Lasting Partnerships
PRESENTERS:
• Sandra Ortega, Councilmember, Tohono O’odham Nation and Chair, Direct Service Tribes Advisory Committee (DSTAC)
• P. Benjamin Smith, Deputy Director, Office of Tribal Self-Governance, IHS
• Andrea Patton, Policy Analyst, Office of Tribal Self-Governance, IHS
• Charles Sockey, Policy Analyst, Office of Tribal Self-Governance, IHS
• Carolyn Crowder, Health Director, Aleutian Pribilof Islands Association
• Erika Wolter, Improvement Programs Administrator, Alaska Native Tribal Health Consortium

Tribal governments continue to develop innovative solutions addressing the health care delivery challenges of their communities. Tribes may elect to obtain health care for their members through the provision of direct services from the Indian Health Service (IHS), Self-Determination Contracts, and Self-Governance Compacts. This session will examine how Tribes receiving health care directly from the IHS (Direct Service Tribes) work in partnership with the IHS to identify and implement health care solutions. Similarly, the session will explore how the IHS Tribal Self-Governance Program recognizes that Tribal leaders and members are in the best position to understand the health care needs and priorities of their communities; the number of Tribal Self-Governance Program success stories grows each year; and, the IHS supports this success by offering information, technical assistance, and policy coordination.

Dena’ina Center: Tubughenq’ 4
7. Addressing the Root Cause of Suicide
PRESENTER:
• Patrick Anderson, Executive Director, Chugachmuit

Unresolved childhood trauma, often referred to in scientific literature as adverse childhood experiences (ACES), guide individuals to adopt a variety of negative behaviors, including suicide, that have very serious consequences for the individual. ACES are quite common among the US population with multiple ACES contributing to increased potential for adopting negative behaviors. Integrating primary health care with behavioral health care, utilizing a one page assessment tool based on the ACES, and restoring our tribal culture to the respectful relationships we once had, can help reduce our suicide rates, as well as improve other health and behavioral issues. This workshop will examine these themes in practice in one Tribal community.

Dena’ina Center: Tubughenq’ 5
8. Using Social Norm-Based Social Marketing to Combat HIV Risk Behaviors in Native Communities
PRESENTERS:
• Tony Aaron Fuller, Capacity Building Assistance Specialist, National Native American AIDS Prevention Center (NNAAPC)
• Robert Foley, President/CEO, NNAAPC, Denver

This hands-on, skills-building workshop is designed to provide participants with the information to return to their communities and begin to think about how to creatively capture a target population’s attention and encourage behavior change using social marketing strategies. This workshop will describe public health social marketing using a four-stage model for developing marketing strategies that encompass the “Five P’s” of marketing. Participants will hear about how the model was implemented in three different Native communities, the results of local community assessments, the social norms contributing to HIV risk, and view the locally developed social marketing materials targeting Native women.

Marriot Hotel: Anchorage Room
9. An Introduction to the Tribal Health Professions Opportunity Grants Program (HPOG) and Evaluation
MODERATOR:
• Michael Meit, Co-Director, National Opinion Research Center Walsh Center for Rural Health Analysis
PRESENTERS:
• Carol Wren, Director Employment and Training Services, Cook Inlet Tribal Council;
• Hilary Forster, Presidential Management Fellow, ACF Project Officer, Office of Planning, Research & Evaluation, Administration for Children and Families (ACF), U.S. Department of Health and Human Services
• Paul Allis, Public Health Project Manager, National Indian Health Board

The HPOG Program, administered by the ACF, funded 32 five-year demonstration projects to develop health workforce training programs targeting Temporary
WORKSHOP SESSION 1 2:00 – 3:30 PM Continued

Assistance for Needy Families (TANF) recipients and other low-income individuals. Five demonstration projects were awarded to Tribal grantees to develop culturally-informed training programs. This session will provide an overview of the Tribal HPOG program, highlight the activities of one Tribal grantee, the Cook Inlet Tribal Council, and introduce evaluation activities designed to identify promising approaches that can be adopted in other Tribal communities.

Marriot Hotel: Fairbanks Room
10. Centers for Disease Control and Prevention’s Office for State, Tribal, Local and Territorial Support: Who We Are and What We Do

PRESENTERS:
• Montreece Ransom, Senior Public Health Analyst, Public Health Law Program/Office for State, Tribal, Local, and Territorial Support, CDC
• Gregory Holzman, Associate Deputy Director, Office for State, Tribal, Local, and Territorial Support, CDC

CDC’s Office for State, Tribal, Local, and Territorial Support (OSTLTS) was established in 2009 with the primary mission of improving the performance and strengthening capacity of the public health system at all levels. In addition to providing technical assistance, OSTLTS works with partners internally and externally to identify gaps, opportunities for collaboration, and the strategies needed to support the growth and enhancement of public health work. This interactive session will provide an opportunity for participants to learn about the work of key OSTLTS programs. Panelists will also discuss technical assistance activities currently underway in support of tribal public health capacity building and performance improvement efforts.

Marriot Hotel: Juneau/Haines Room
11. Tribal Project to Implement Electronic Medical Records: National Indian Health Board Regional Extension Center Overview, Partner Organizations, and Provider Services

PRESENTERS:
• Tom Kauley, Acting REC Director, National Indian Health Board (NIHB)
• Shawn Sundance Leckey, Deputy REC Director, NIHB
• Byron Jasper, DDS, Deputy Director of Public Health, United South and Eastern Tribes, Inc.

NIHB REC Overview, Partner Organizations, and Provider Services - Tom Kauley, Acting REC Director and Byron Jasper, DDS, REC Clinical Lead provide an overview of the NIHB REC’s purpose, milestone goals and status of current provider sign ups. The presentation will introduce the Regional Tribal Organizations that have joined in partnership to deliver “boots-on-the-ground” services to Providers in their Service Area. The presenters will provide an overview of the Electronic Health Record and Meaningful Use services delivered to Primary Care Providers working in IHS/Tribal/Urban Indian health facilities through the use of NIHB REC funds.

3:30 – 3:45 pm
3rd Floor Foyer
Healthy Snack Break

WORKSHOP SESSION 2 3:45 – 5:15 PM

Dena’ina Center: Tikahtnu C
12. A Path to Healthier Native Communities

PRESENTER:
• Timothy Thole, Western Regional Office, Food and Nutrition Service, USDA

The mission of the USDA Food and Nutrition Service (FNS) is to provide children and needy families better access to food and more healthful diets through its food assistance programs and nutrition education efforts. The presentation will provide a general overview of USDA FNS food assistance programs and how they relate to Native Communities. Emphasis will be on nutrition programs for children at school or in an educational program setting, such as School Meals, the Child and Adult Care Food Program and the Summer Food Service Program.

Dena’ina Center: Tikahtnu D
13. The Tribal Voice in the Indian Health Service (IHS) Budget Formulation Process

Tribal recommendations for the IHS Budget are developed each year through Tribal budget formulation meetings at the IHS-Area level during and during two national IHS Tribal Budget Workgroup meetings. Through these meetings, the Tribal needs and priorities for programs under the IHS budget authority are identified and this process ends in the creation and delivery of Tribal Testimony for the annual HHS Department-wide consultation. During this workshop you will hear from NIHB Board Members who are members of the IHS Tribal Budget Formulation Workgroup and from two of the Tribal technical staff team members who will discuss why Tribes need to be involved, how this process works and how Tribal voices must and can be heard from the beginning of the Area-wide tribal consultation meetings to final passage of the President’s budget. Also, learn how the Tribally-set priorities and budget targets become the foundation of NIHB’s appropriations advocacy work.
to Congress. Finally, learn about the status of the IHS budgets in the upcoming Fiscal Year 2012 and the tribal recommendations for Fiscal Year 2013.

SPEAKERS:

Ensuring that All Tribes are Heard in the IHS Tribal Budget Formulation Process
- Andy Joseph, Jr., National Co-Chair, IHS Tribal Budget Formulation Work Group and NIH Board Member (Portland Area)
- H. Sally Smith, NIH Representative, IHS Tribal Budget Formulation Work Group and NIH Executive Committee Member (Alaska Area)

Self Governance Tribes and the Budget Formulation Process
- Cecilia Firethunder, Tribal Technical Advisor, IHS Tribal Budget Formulation Work Group and Administrative Officer, Great Plains Tribal Chairmen’s Health Board
- Jim Roberts, Tribal Technical Advisor, IHS Tribal Budget Formulation Work Group and Policy Analyst, Northwest Portland Area Indian Health Board

Direct Service Tribes and the Budget Formulation Process
- Rex Lee Jim, Navajo Nation Representative, IHS Tribal Budget Formulation Work Group and NIH Board Member (Navajo Area)
- Delores Plunkett, Tribal Technical Advisor, IHS Tribal Budget Formulation Work Group and NIH Executive Committee Member (Portland Area)

Dena’ina Center: Kahtnu 1

15. A Community Based Participatory Research Partnership: Identifying the Shared Cultural Knowledge and Beliefs About Cancer in an American Indian Community

MODERATOR:
- Cynthia Claus, Ph.D, MPH, Director, Office of Health Programs, Phoenix Area Indian Health Service

PRESENTERS:
- Linda Roche, CHR/Wellness Program Manager, Yavapai-Apache Nation
- Annette Mendez, Yavapai-Apache Health Clinic Manager
- Delores Plunkett, Yavapai Cultural Program Manager

Native American communities face an ongoing challenge of effectively addressing cancer health disparities, as well as environmental justice issues that may compound these inequities. The goal of this study was to determine if a shared cultural model about cancer existed in an American Indian community. A cultural consensus method, an approach that combines qualitative and quantitative data, was used in identifying the collective knowledge and beliefs about the prevention, cause(s), treatment and survivorship of cancer. A community-based participatory research (CBPR) approach was applied at all stages of the development and implementation of the study.

Dena’ina Center: Kahtnu 2

16. The Hope and Planning of a Tribal Public Health Department and Accreditation on the Navajo Nation

MODERATOR:
- Ramona Antone-Nez, MPH, BSN, Principal Planner, Navajo Division of Health

PRESENTERS:
- Madan Poudel, PHD, Health Services Administrator, Navajo Division of Health;
- Roselyn Begay, Acting Division Director, Navajo Nation Division of Health

The Navajo Nation Division of Health is planning a health care system to focus on preventing disease and improving the health of communities through the development of the Navajo Department of Public Health (NNDOH), designed as a state-like Department of Public Health. The NNDOH foresees Public Health Tribal Accreditation challenges because this initiative differs from the traditional Indian Health Service approach to patient health care. In this workshop, NNDOH will present its experiences and plans to
develop the system in conjunction with the reauthorized Indian Health Care Improvement Act and the Public Health Accreditation Board standards.

Dena'ina Center: Tubughneng' 3

17. Maximizing Payment and Enforcement Reimbursement Rights under the Indian Health Care Improvement Act.

MODERATOR:
- Lloyd B. Miller, Esq., Partner, Sonosky, Chambers, Sachse, Miller & Munson, LLP

PANELIST:
- Richard D. Monkman, Esq., Partner, Sonosky, Chambers, Sachse, Miller & Munson, LLP

Critical components to advancing Native Health are both the congressionally-rationed right of Indian healthcare providers to secure reimbursement for reasonable healthcare charges from insurance companies and individual tortfeasors (or their insurance companies) who injure Indian beneficiaries, and the crediting of reimbursements to the IHS Service Unit, Tribe, Tribal organization that provided the service. This workshop will review amended Sections 206 and 207 of the Indian Health Care Improvement Act, analyze related case law, and offer strategies for maximizing reimbursement efforts.

Dena'ina Center: Tubughneng' 4


MODERATOR:
- Donald Warne, MD, MPH, Director, Office of Native American Health, Sanford Health

PRESENTERS:
- Patricia Stevenson, RN, MSN, CWS-BC, FCCWS, Lead Clinical Specialist-Contractor Oklahoma City Area Office, Indian Health Service
- Dr. Wesley Yamada, Chief of Podiatry, Hu Hu Kam Memorial Hospital, Sacaton, Arizona
- Carlyle Begay, American Indian Health and Management Policy, Phoenix, Arizona

Diabetes wound care represents a great expense in both costs and provider time across Indian Country. More importantly, the physical assault wounds have on a diabetic has an incremental impact on patients and families in terms of quality of life and potential for amputation. Innovative programs that address the whole patient and factor multiple aspects of patient care and offer high healing outcomes are needed, especially regarding amputation prevention. The Wound Management Model is designed to meet the multiple needs of the diabetic patient and to facilitate multiple wound care delivery models. Specialized supplies and expanded formularies are included to promote consistent care and reduce waste and duplication.

Dena'ina Center: Tubughneng' 5

19. Health Data and Research Development for American Indian & Alaska Native

PRESENTERS:
- Ellen M. Provost, DO, MPH, Director, Alaska Native Epidemiology Center, Alaska Native Tribal Health Consortium
- Jay Butler, Senior Director Division of Community Health Services, Alaska Native Tribal Health Consortium

Health data and research is critical to addressing health disparities of American Indians and Alaska Natives. The Tribal Epidemiology Centers, like the Alaska Native Epidemiology Center, serve a unique role in supporting local tribal disease surveillance and control programs and in assessing the effectiveness of public health programs. The HHS Health Research Advisory Council (HRAC) was developed as a formal avenue through which American Indian and Alaska Native communities could provide input on health research to HHS. This session will allow conference participants to hear about the successes of the Tribal Epicenters and to provide concerns and recommendations to HRAC to consider pertaining to the issues associated with health disparities and health research funding issues facing AI/AN communities.

Marriot Hotel: Anchorage Room

20. Preparing Indigenous Heroes to Provide Healthcare in their Communities

MODERATOR:
- Cheryl Lovegreen, Student Success Facilitator, Recruitment and Retention of Alaska Natives into Nursing (RRANN), University of Alaska Anchorage School of Nursing

PRESENTERS:
- Mary Reeve Habson, Student Success Facilitator, RRANN, UAA School of Nursing
- Stephenita Apokedak, BS Student in UAA School of Nursing, RRANN Student
- Jackie Pilaum, Associate Vice Provost for Health Programs Development, UAA School of Nursing

RRANN is committed to increasing the number of Alaska Natives and American Indians graduating with an Associate of Applied Science or Baccalaureate of Science Nursing degree. Presenters will discuss how students are served throughout the state of Alaska, including
challenges and successes, and how this model may assist other Tribal Communities with increasing their number of health care professionals.

Marriot Hotel: Fairbanks Room

21. Addressing Environmental Public Health Priorities in Indian Country: New Efforts and Strategies

MMODERATOR:
- Annabelle Allison, Tribal Liaison, Centers for Disease Control and Prevention/Agency for Toxic Substance and Disease Registry Office of Tribal Affairs

PRESENTERS:
- Chinnyere Ekechi, Public Health Analyst, National Center for Environmental Health/ATSDR Office of Policy, Planning and Evaluation, CDC
- Montreese Ransom, Senior Public Health Analyst, Public Health Law Program/ CDC Office for State, Tribal, Local, and Territorial Support

The Office of Tribal Affairs (OTA) for the NCEH and the ATSDR have convened a National Tribal Environmental Health (NTEH) Think Tank to assist the OTA in the development of a 3-5 year Strategic Plan. This plan will provide vision, define OTA’s purpose and mission, ensure the most effective use of OTA resources by establishing key priorities, create a base from which progress can be measured, and create a foundation for future internal/external partnerships and collaborations. This workshop will introduce the NTEH Think Tank and gather feedback from participants on the strategic plan’s direction thus far.

Marriot Hotel: Juneau/Haines Room

22. Resource and Patient Management System Electronic Health Records

PRESENER:
- Howard Hays, Acting Indian Health Service Chief Information Officer

This workshop will provide an overview of the IHS RPMS Electronic Health Record (EHR) System including the current status of deployment in IHS/Tribal/Urban Indian health facilities across Indian Country. This presentation also will provide a general overview of and update on the development of the RPMS EHR to achieve Meaningful Use of EHR standards. The presenter also will provide information on the patient-centric features of RPMS EHR.
Day 2

WEDNESDAY, SEPTEMBER 28, 2011

Annual Centers for Medicare & Medicaid Services (CMS) Day — sponsored by CMS

7:00 am – 5:00 pm
3rd Floor Foyer
Registration

7:00 am – 5:00 pm
Idulghet 2 & 3
Exhibits Open

7:00 am – 8:00 am
1st Floor Lobby, Dena'ina Center
Let's Move! in Indian Country Health Walk
• Megan Gregory, Founder, “Every Mile is Worth It,” Juneau, Alaska

8:00 am – 9:30 am
3rd Floor Foyer
Continental Breakfast Served

8:30 am – 8:45 am
Tikahtnu Ballroom A & B
Welcome to Centers for Medicare & Medicaid Services (CMS) Day
• H. Sally Smith, NIHB Alaska Area Representative, NIHB Secretary, NIHB Representative to the CMS Tribal Technical Advisory Group (TTAG), and Chairperson, Bristol Bay Area Health Corporation

8:45 am – 9:45 am
Tikahtnu Ballroom A & B
Keynote Address: CMS Tribal Technical Advisory Group: Progress and Future Goals
• Valerie Davidson, Chair, CMS Tribal Technical Advisory Group (TTAG); Senior Director, Legal and Intergovernmental Affairs, Alaska Native Tribal Health Consortium

9:45 am – 10:15 am
Tikahtnu Ballroom A & B
Keynote Address: CMS Tribal Technical Advisory Group: Progress and Future Goals
• Don.1ld I. Berwick, M.D., P.P., Administrator, Centers for Medicare and Medicaid Services (CMS)

10:15 am – 11:00 am
Tikahtnu Ballroom A & B
Key Issues In Structuring an Exchange From the Tribal Perspective: Building the Foundation
• Overview: Jennifer Cooper, JD, MPA, Legislative Director, NIHB
• Update of NIHB Regulation Review Work/Inclusion of Indian Health Service/Tribal/Urban Indian Providers: Doneg McDonough, Consultant on Health Reform Implementation, NIHB
• Definition of Indian: Myra Munson,Esq., Partner, Sonosky, Chambers, Sachse, Miller & Munson LLP
• Indian Addendum: Elliott Milhollin, Partner, Hobbs, Straus, Dean and Walker, LLP

11:00 am – 11:30 am
Tikahtnu Ballroom A & B
Office of Public Engagement: Outreach and Enrollment
• Teresa Niño, Director, Office of Public Engagement, Centers for Medicare & Medicaid

Children's Health Insurance Program Reauthorization Act Video: Working Together: For Our Children For Our Future
• Gale Marshall (Choctaw), President, Two Feathers Media, North Carolina
NIHB ANNUAL AWARDS LUNCHEON
This annual event includes the presentation of national awards honoring the exemplary service and dedication of groups and individuals in the arenas of health delivery, community service, excellence in healthcare program administration, and health promotion and disease prevention. The award categories include the Jake Whitecrow Lifetime Achievement Award, National, Regional, and Local Awards and a Youth Leadership Award.

MISTRESS OF CEREMONIES: Gale Marshall (Choctaw), President, Two Feathers Media, North Carolina

WORKSHOP SESSION 3  2:00 - 3:30 PM

Tikahnu C  (Repeats)
1. 2014 No Wrong Door: Medicaid Expansion, Simplification Process and Integration of Health Insurance Exchange Plans. This workshop repeats in workshop session 4.

This workshop will provide an overview of proposed regulations released by the Centers for Medicare & Medicaid Services (CMS) implementing sections of the Affordable Care Act on state health insurance exchanges and Medicaid eligibility expansions. The Center for Consumer Information and Insurance Oversight (CCIIO) issued proposed regulations outlining a framework to assist states in building Insurance Exchanges, a State based competitive health insurance marketplace where people and small businesses can shop for and buy affordable private health insurance. The Center for Medicaid, Children’s Health Insurance Program and Survey & Certification (CMCS) issued proposed regulations that seek to expand and simplify Medicaid eligibility. With a “no wrong door” approach, consumers will have access to a seamless system of affordable coverage through coordination of Medicaid and CHIP with the new Exchanges. Learn more about these new programs and what they will mean to you, your family, and your tribal community.

PRESENTERS:
- Valerie Davidson, Chair, CMS Tribal Technical Advisory Group; Senior Director, Legal and Intergovernmental Affairs, Alaska Native Tribal Health Consortium
- Jackie Garner, Consortium Administrator, Consortium for Medicaid and Children’s Health Operations (CMCHO), CMS

- Lisa Marie Gomez, Center for Consumer Information and Insurance Oversight (CCIIO)
- Doneg McDonough, NIHB Policy Consultant

Tikahnu D
2. Roundtable Discussion: Medicaid 101 and Meet Your Native American Contact (NAC)

This session will provide an overview of Medicaid and the Children’s Health Insurance Program (CHIP) administration, eligibility, covered services and reimbursement for Tribal Health Program staff and beneficiaries with a focus on specific provisions for American Indians and Alaska Natives.

CMS NACs from each Regional Office will be available to address the provider enrollment process and provide information about how to maximize collections for services provided by tribal programs. The second part of the session will address how the CMS NACs work together with States, IHS and Tribal programs.

PRESENTERS:
- Centers for Medicare & Medicaid Services Native American Contacts

Kahtnu 1
3. Integrating Indian Health Service and American Indian and Alaska Native Medicaid Data

A data match of Medicaid and Indian Health Service (IHS) utilization was accomplished through a collaborative effort between CMS and IHS. As a result of this data match, the California Rural Indian Health Board is researching some basic questions, such as: What proportion of Indian health system users are enrolled in Medicaid? What proportion of the care is paid to IHS and tribal programs by Medicaid? What proportion of the care is paid to other health care providers? How do the answers to these questions vary across the IHS system? Join us for a discussion of what the data is revealing and let us know what questions should be further investigated.

MODERATOR:
- Jim Crouch, Executive Director, California Rural Indian Health Board, Inc.

PRESENTERS:
- Ed Fox, Ph.D, Health Services Director, Port Gamble S’Klallam Tribe
- Carol Korenbrot, Ph.D, Research Director, California Rural Indian Health Board, Inc.
WORKSHOP SESSION 3  2:00 – 3:30 PM  Continued

Kahtnu 2


Alaska Native tribal health facilities have staff focused on bringing better health care to their communities by enrolling people in Medicare and Medicaid and helping beneficiaries navigate these complex systems. Learn about the win-win partnership between the Yukon-Kuskokwim Health Center and the State Health Insurance Program (SHIP), Alaska’s Medicare Information Office. Using webinars, video-conferencing, online study and certification tools, tribal facilities are gaining capacity to assist people turning 65 to get enrolled in all the appropriate parts of Medicare, assuring older and disabled people get the care they should.

PRESENTERS:
• Judith Bendersky, MPH, Medicare Information Office, Alaska Department of Health and Social Services
• Diana M. Murat, YKHC Director of Healthcare, Outreach Programs & Enrollment (H.O.P.E.)

Tubughnenq’ 4

5. International Statistical Classification of Diseases and Related Health Problems, 10th Revision (known as “ICD-10”): Bigger & Closer Than You Think

If you’re involved in any aspect of health care, you’ll likely be affected by the upcoming transition to the ICD-10 code set. ICD is an internationally accepted method of coding medical diagnoses and inpatient medical procedures. The United States currently uses ICD-9, but that code set no longer meets the demands of modern health care. On October 1, 2013, the U.S. health system will convert from ICD-9 to ICD-10, a much more robust, modern code set already employed throughout the rest of the world. ICD-10 is both bigger and closer than it appears. Learn more about how the conversion will affect your work, your organization and health care in the U.S. Hear about the challenges, opportunities, and some lessons learned from the federal health enterprise perspective and find out more about what you should be doing, where you should be looking, and available resources to prepare you and your organization.

PRESENTER:
• Christi Dant, MPM, Office of E-Health Standards & Services (OESS), CMS

Tubughnenq’ 4

6. Media Nuts and Bolts for Indian Country

This workshop will teach you the nuts and bolts of engaging the local and regional media in your communities. It will focus on the real skills you need to market your events and community activities. The presenters will share detailed skill building for how to develop scripts, how to interview, how to blog and use all media conduits, including new social media opportunities: web pages, twitter, Facebook, and YouTube. Examples on how media markets were used to promote enrollment of American Indian and Alaska Native children in Medicaid and CHIP will be featured. The presenters will share real world experience and give you the building blocks for implementation of successful media engagement strategies.

PRESENTERS:
• Lindsey Cometa and Georgey Sparks, Tribal Affairs Group, CMS
• Pamela Gentry and Brian Smart, Strategic Marketing Group, CMS

3:30 – 3:45 pm
3rd Floor Foyer
Healthy Snack Break

WORKSHOP SESSION 4  3:45 – 5:15 PM

Tikhahtnu C (Repeats)

7. 2014 No Wrong Door: Medicaid Expansion and Simplification Process and Integration of Health Insurance Exchange Plans. This workshop is a repeat from Workshop Session 3.

This workshop will provide an overview of proposed regulations released by the Centers for Medicare & Medicaid Services (CMS) implementing sections of the Affordable Care Act on state health insurance exchanges and Medicaid eligibility expansions. The Center for Consumer Information and Insurance Oversight (CCIIO) issued proposed regulations outlining a framework to assist states in building Insurance Exchanges, a State-based competitive health insurance marketplace where people and small businesses can shop for and buy affordable private health insurance. The Center for Medicaid, Children’s Health Insurance Program and Survey & Certification (CMCS) issued proposed regulations that seek to expand and simplify Medicaid eligibility. With a no wrong door approach, consumers will have access to a seamless system of affordable coverage through coordination of Medicaid and CHIP with the new Exchanges. Learn more about these new programs and what they will mean to you, your family, and your tribal community.
PRESENTERS:
• Valerie Davidson, Chair, CMS Tribal Technical Advisory Group; Senior Director, Legal and Intergovernmental Affairs, Alaska Native Tribal Health Consortium
• Jackie Garner, Consortium Administrator, Consortium for Medicaid and Children’s Health Operations (CMCHO), CMS
• Lisa Marie Gomez, Center for Consumer Information and Insurance Oversight (CCIIO)
• Doneg McDonough, NIH Policy Consultant

Tikahu D
8. Roundtable Discussion Medicare 101 and Meet your Native American Contacts (NACs)
This session will provide an overview of Medicare parts A, B, C and D for Indian and Tribal Health Program staff and beneficiaries focusing on specific provisions for American Indians/Alaska Natives. The session will address the provider enrollment process and information about how to maximize collections for services provided by tribal programs. CMS NACs from each Regional Office will be available to address how 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.

PRESENTERS: Centers for Medicare & Medicaid Services NACs

Kahtnu 1
9. Opportunities and Challenges Related to Establishing and Expanding Home and Community-Based Service (HCBS) in Indian Country
This session will provide an overview of Long Term Care in the context of the Affordable Care Act (ACA) and the Indian Health Care Improvement Act (IHCIA). The new authorities provide potential opportunities to expand long term care home and community based services (HCBS) to Indian Country and IHS. The session will specifically cover expansions to Medicaid home and community based services provisions including Money Follows the Person, Community First Choice, Balancing Incentives, and others. The conference presenters will explore with the audience how these provisions might provide opportunities for HCBS Long Term Care services in Indian Country, particularly in light of the Indian Health Care Improvement Act provisions related to Long Term Care.

PRESENTERS:
• Kay Branch, Elders/Rural Health Programs Coordinator, Alaska Native Tribal Health Consortium
• John Johns, JD, Health Insurance Specialist, Tribal Affairs, CMS

Kahtnu 2
10. Southeast Alaska Regional Health Consortium (SEARHC) Works With CMS Demonstrations: Frontier Extended Stay Clinic (FESC) and Rural Community Hospitals (RCH) and How to Replicate them in Indian Country
SEARHC will share information and background on working with CMS on Medicare demonstration projects including the Frontier Extended Stay Clinic (FESC) and the Rural Community Hospital (RCH) programs. The FESC demonstration project addresses the needs of seriously or critically ill or injured patients who, due to adverse weather conditions or other challenges, cannot be transferred to acute care referral centers, or patients who need monitoring and observation for a limited period of time. The RCH demonstration allows participating hospitals to be paid on a reasonable cost basis. Topics will include cost reporting, survey and certification issues, and working with the State of Alaska on how to replicate similar demonstrations in Medicaid.

PRESENTERS:
• Roald Helgesen, President and CEO, SEARHC
• State of Alaska, Medicaid Representative

Tubughnenq’ 3
11. Meaningful Use and the Electronic Health Record (EHR) Incentive Program
Healthcare facilities across Indian Country are adopting electronic health records (EHRs) to improve the safety and quality of patient care, increase efficiency, and limit risk. The Centers for Medicare and Medicaid Services (CMS) Incentive Programs offer financial incentives to providers and hospitals that are meaningful users of certified EHR technology. This session will discuss the requirements of the EHR Incentive Programs, describe how to meaningfully use an EHR, and identify available resources. Experts from CMS will be available to answer questions.

FACILITATOR:
• Captain Jim Lyon, Senior Health Insurance Specialist, CMS

PRESENTERS:
• Vicki French, Meaningful Use National Lead of NIH Native American Indian and Alaska Native National High Tech Regional Extension Center, United South and Eastern Tribes, Inc.
• State of Alaska Meaningful Use Coordinator
WORKSHOP SESSION 4  3:45 – 5:15 PM  Continued

Tubughnenq’ 4

12. New Trends and Innovative Ways to Improve Outreach and Enrollment in Medicaid and Children’s Health Insurance Program (CHIP)

This workshop will focus on promising practices to improve outreach and enrollment of American Indian/Alaska Native families and children in Medicaid and CHIP. CMS will provide an overview of flexibilities for outstationing outreach and how states can provide administrative dollars for those activities. Information will be presented on new authorities in the Affordable Care Act for Tribes to assist tribal members with navigating through the health Exchange plans. Representatives from California Rural Indian Health Board, Inc. will describe how the Medicaid Administrative Match program has been successfully implemented to increase enrollment and to pay for outreach workers, and the Port Gamble S’Kallam Tribe will describe how the Tribe has increase enrollment through a Temporary Assistance for Needy Families arrangement with the State of Washington.

PRESENTERS:
• Cyndi Gillaspie, Technical Director, Lead Native American Contact, Consortium for Medicaid and Children’s Health Operations, CMS
• Ed Fox, Ph.D., Health Services Director, Port Gamble S’Kallam Tribe, Washington
• Marilyn Pollard, Administration Director, California Rural Indian Health Board, Inc.

5:00 pm
Shuttle Service from Dena’ina Center to Alaska Native Heritage Center Begins
• Shuttles will run every 15 minutes.
Day 3

THURSDAY, SEPTEMBER 29, 2011

7:00 am - 1:00 pm
3rd Floor Foyer
Registration

7:00 am - 1:00 pm
Idulghet 2 & 3
Exhibits Open

8:00 – 9:00 am
3rd Floor Foyer
Continental Breakfast Served

9:00 – 9:10 am
Tikahtnu Ballroom A & B
Opening Remarks and Welcome to Youth and Community Centered Health Issues Day
• Tom John, NIHB Oklahoma Area Representative and Treasurer, Administrator for Self Governance, Chicksaw Nation

9:10 – 9:40 am
Tikahtnu Ballroom A & B
Keynote: Traditional Perspectives on Suicide Prevention
Suicide is the second-leading cause of death behind unintentional injuries among Indian children and young adults, and is on the rise, according to the Indian Health Service. Native Americans ages 10 to 24 killed themselves at more than twice the rate of similarly aged whites, according to the most recent data available from the federal Centers for Disease Control and Prevention. Dr. Warne will provide insight into this epidemic and explore possible culturally-sound solutions.
• Don Warne, MD, MPH, Senior Policy Advisor, Great Plains Tribal Chairman’s Association and Director, Office of Native American Health, Sanford Health, South Dakota

9:40 – 10:00 am
Tikahtnu Ballroom A & B
Keynote: Centers for Disease Control and Prevention (CDC) Efforts to Empower Tribes and Advance the Health of American Indians and Alaska Natives Communities
The Office for State, Tribal, Local and Territorial Support (OSTLTS) serves as the primary link between the CDC, the Agency for Toxic Substance and Disease Registry (ATSDR), and Tribal governments. OSTLTS’ tribal support activities are focused on fulfilling CDC’s supportive role in ensuring that American Indian/Alaska Native (AI/AN) communities receive public health services that keep them safe and healthy. CDC/ATSDR has adopted a policy that requires all agency programs consult with Tribal governments when developing programs and activities that will affect Native populations. As sovereign nations, AI/AN tribes exercise inherent sovereign powers over their members, territory, and lands.
• Greg Holzman, MD, Associate Deputy Director, Office for State Tribal Local and Territorial Support (OSTLTS), CDC

10:00 – 10:15 am
Tikahtnu Ballroom A & B
Keynote: Inspiring Native Heroes in Health
• Callan Chythlook-Sitsolof, (Yupik/Inupiaq), 2010 U.S. Winter Olympian Snowboarder

10:15 – 10:45 am
Tikahtnu Ballroom A & B
Behavioral Health and Tribal Communities
SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities. The Agency was established in 1992 and directed by Congress to target effectively substance abuse and mental health services to the people most in need and to translate research in these areas more effectively and more rapidly into the general health care system. Over the years SAMHSA has demonstrated that prevention works, treatment is effective, and people recover from mental and substance use disorders. Behavioral health services improve health status and reduce health care and other costs to society. SAMHSA has recently made significant
investment into American Indian and Alaska Native youth suicide initiatives.
- Pamela S. Hyde, JD, Administrator, Substance Abuse and Mental Health Services Administration (SAMHSA), Department of Health and Human Services

**Overview of the First Ever Nationally Supported Let’s Move! in Indian Country Initiative:**
- Lillian Sparks, Commissioner, Administration on Native Americans, Administration for Children and Families

**Let’s Move! in Indian Country**
- Charles Galbraith, Associate Director, Office of Public Engagement, The White House

**A Tribal, Activities-Based Let’s Move! in Indian Country Program**
- Brandy Bunner, Project Director, Let’s Move! in Indian Country Project, Athabascan Nation Chickaloon Village, Alaska

**MODERATOR:**
- Buford Rolin, Chairman, Tribal Leaders Diabetes Committee (TLDC)

**PRESENTERS:**
- Julia Davis-Wheeler, TLDC Co-Chair
- Gale Marshall, Spokesperson, American Diabetes Association, Awakening the Spirit
- Meera Narayanan, MS, RD, CDE, Alaska Native Tribal Health Consortium SDPI program
- Denise Ramp, MSN, CNM, NP-C, Alaska Native Tribal Health Consortium SDPI program

**10:45 – 11:30 am**
Tikahtnu Ballroom A & B

**The Special Diabetes Program for Indians (SDPI): History, Harmony & Hope**

Hear from key advocates and program managers discuss the current status of the Special Diabetes Program for Indians, outcomes from the Alaska Native Tribal Health Consortium SDPI program and outlook for the future of the SDPI program.

**MODERATOR:**
- Buford Rolin, Chairman, Tribal Leaders Diabetes Committee (TLDC)

**PRESENTERS:**
- Julia Davis-Wheeler, TLDC Co-Chair
- Gale Marshall, Spokesperson, American Diabetes Association, Awakening the Spirit
- Meera Narayanan, MS, RD, CDE, Alaska Native Tribal Health Consortium SDPI program
- Denise Ramp, MSN, CNM, NP-C, Alaska Native Tribal Health Consortium SDPI program

**Let’s Move! in Indian Country: Addressing Youth Obesity Prevention & Intervention**

On July 13, 2011 The Administration for Children and Families (ACF), Administration for Native Americans (ANA) announced ten awards, totaling $193,437 to Tribal grantees participating in the First Lady’s initiative: Let’s Move! in Indian Country. The Let’s Move! in Indian Country campaign is dedicated to solving the problem of obesity through improved health, wellness, nutrition, and physical activity. This session will provide information about the First Lady’s initiative, specific to Indian Country, as well as a briefing from at least one Tribal awardee under this program.

**Overview of the First Ever Nationally Supported Let’s Move! in Indian Country Initiative:**
- Lillian Sparks, Commissioner, Administration on Native Americans, Administration for Children and Families

**Tikahtnu Ballroom A & B**

**11:30 am – 12:15 pm**

**Closing Remarks**
- H. Sally Smith, NIHB Alaska Area Representative, NIHB Secretary and Chairperson, Bristol Bay Area Health Corporation

**Invitation to the 29th ACC in Denver – Celebration of the NIHB 40th Anniversary**
- Lester Secatero, NIHB Albuquerque Area Representative and Chairperson, Albuquerque Area Indian Health Board

**Closing Prayer**
2010 Award Winners

Jake White Crow Award
- Robert D. Moore

Nation Impact Awards
- Cynthia Ahwinona, Nome Eskimo Community Tribal Council
- Alejandro Bermudez-del-Villar, National Council of Urban Indian Health
- Mr. Norman Cooyate
- Ms. Kathy Hughes, Sovereign Oneida Nation of Wisconsin, HHS Tribal Health Research Advisory Council
- Gale Marshall, Association of American Indian Physicians, American Diabetes Association, National Indian Health Board, National Institutes of Health, CDC
- Allison Binney, Senate Committee on Indian Affairs

Area and Regional Impact Awards
- Virginia Washington
- John Eagle Shield
- James Segura
- Agatha Amos
- Denise Aragon
- Norton Sound Health Corporation Board of Directors
- Division of Environmental Health & Engineering (DEHE)
- Mary Brickell
- March of Dimes American Indian/Alaska Native Women’s Committee
- Cynthia Schraer, MD
- Bill Lance, Terry Rice, Marjorie Rogers
- Johnny Hernandez
- Dr. Dan Calac

Local Impact Award
- Fort Defiance Indian Hospital Board, Inc.
- Citizen Potawatomi Nation (CPN) Health Services
- Connie Hill, Traditional foods program
- Hickory Star, Service Director, IHS Lawton Service Unit Oklahoma
- HOPP (Healthy O’odham Promotion Program)
- Principle Delbert Ortiz

- Laura Rambeau-Lawson
- Jerome J. Simone

Youth Leadership Award
- Bahweting Anishinabe Tribal Youth Council

2009 Award Winners

Jake White Crow Award
- Senator Lisa Murkowski

National Impact Awards
- Kevin Gottlieb, D.D.S. of the South Central Foundation
- H. Sally Smith of the Bristol Bay Area Health Corporation
- Valerie Davidson of the Alaska Native Tribal Health Consortium
- Anslem Roanhorse, Jr. of the Navajo Native Division of Health
- Healthy Community Nursing Division of the Little River Band of Ottawa Indians
- CDC Arctic Investigations Program

Area and Regional Impact Awards
- Joseph Erpelding, MD Orthopedic Surgeon, Yellowstone Medical Center in Billings, MT
- Donna Singer, Chief Executive of the Utah Navajo Health System, Inc.
- Family Wellness Warriors Initiative of Southcentral Foundation
- Alaska Federal Health Care Partnership Home Telehealth Program

Local Impact Awards
- Ramin Naderi of the Indian Health Center of Santa Clara Valley, CA
- Jan V. Chacon Indian Health Center of Santa Clara Valley, CA
- Daniel J. O’Connell, MD of the Bristol Bay Area Health Corporation
- Alaska Native Medical Center Nurses, Anchorage
- Alaska Native Medical Center Auxiliary, Anchorage.
Youth Leadership Award

- Allison Simeon of the Yupik and Athabascan Tribes

2008 Award Winners

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 achievement and personal sacrifice toward the advancement of health care of all American Indians and Alaska Natives

National Impact Award

- Ms. H. Sally Smith
- 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

Regional Impact Award

- Ernest C. Becenti Jr., Gallup Indian Medical Center Steering Committee
- Tina Bullock, Nimiipuu Health Clinic, Nez Perce Tribe
- Dr. Franklin R. Freeland, Fort Defiance Indian Hospital
- Joe Garnic, 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

Regional Impact Award

- Judy Thompson, Alaska Native Medical Center-Diabetes Program
- CMDR Tracy Williams, Fallon Tribe Health Clinic
- Health 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, MD, Providence Alaska Medical Center, Alaska Native Medical Center
- Angela Bronsheau, Nimiipuu Health Clinic, Nez Perce Tribe
- Freda HeavyRunner, Blackfeet Community Hospital
- Archie Hendricks Sr., Tohono O’odham Nursing Care Authority
- Kendra Lone Elk, Indian Health Service, Pine Ridge Service Unit
- Margie Mejia, Lytton Band of Pomo Indian Rancheria
- Gloria Zuniga, Association of American Indian Physicians, Oklahoma
- Helen Maldonado, Area Diabetes Consultant, IHS
- Teresa A. Monger, Oklahoma Area Indian Health Service, Pawnee Service Unit
- Jerome J. Simone, United Indian Health Service, 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

Youth Impact Award

- Kayla Carpenter, Salmon Run Relay, Yurok
- Erica Chase, Salmon Run Relay, Hoopa

2007 Award Winners

Jake White Crow Award

- Rachel Joseph, National Steering Committee
- Buford Rolin, Tribal Leaders Diabetes Committee

National Impact Award

- Juliet Pittman, 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

- Cheyenne River Sioux Tribe, Health Department 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 Malicy, 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 Quamets, Yakima Healthy Heart
• Darlene Lynch, San Bernardino 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 Stermill, Cowitz 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
  Department
• Pilar Pettitford, Sycuan Medical Dental Center
• Francia Corpuzm, Sycuan Medical Dental Center

Youth Leadership Award
• Cinda Hughes, National Congress of American Indians

2006 Award Winners

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
• Centers for Medicare & Medicaid Services, Regional
  Native American Contacts
  • Irv Rich, CMS Region I – Boston
• Julie Rand, CMS Region II – New York
• Tamara McCloy, CMS Region III – Philadelphia
• Dianne 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, Bemidji
  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, Tule River Tribal Clinics, Inc.

Local Impact Award
• Jody Abe, Elko Band Council
• Cassandra Allen, Ak-Schik Indian Community
• Michael Allison, Arizona Department of Health Services
• Sandra Beauchamp, Native American Health Center
  Family and Child Guidance Clinic
• Choctaw Nation CARES Project
• Lewis Hall, Minne-Tohe 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 Kelson, Norton Sound Health Corporation
• Janet Kind, Native American Health Center. Family &
  Child Guidance Clinic
• Cecil Means II, Aberdeen Area IHS Prevention
  Research
• Center Staff, University of New Mexico
• Karen Saylors, Native American Health Center. Family
  and Child Guidance Clinic
• Judith Skandodore, Oneida Community Health Center
• Kevin Stange, Alaska Native Medical Center
• Sandra Twaddle, Choctaw Native CARES Project
• Berda Wilson, Norton Sound Health Corporation
In Memorial

The National Indian Health Board honors the Tribal leaders, advocates, and heroes who have walked on this year. We will always remember their dedication, leadership, and work for all American Indian/Alaska Native people.
Darryl Dean Red Eagle, Wambdi Sake Suta (Strong Eagle Talons), age 45, was born on May 29, 1966, to the late Delmar Red Eagle and Betty (Good Bird) Black Dog. Darryl left unexpectedly into the Spirit World on June 20, 2011, due to natural causes. Darryl worked in various jobs in Montana, North Dakota, and South Dakota such as: Black Hills Forestry in Custer, S.D.; Shelter for Neglected Children in Rapid City, S.D.; Concrete Foundations in Bismarck, N.D.; Fort Lincoln State Park Cultural Resources in Mandan, N.D.; The Fort Peck Tribes as the Tribal Courts Cultural Resource Specialist; and later TERO Director; and most recently Darryl was a proud member of the Fort Peck Tribal Executive Board, serving his third term on the Council, an accomplishment he so well deserved and of which he was very proud. He also served as the National Co-Chair of the Indian Health Service (IHS) National Tribal Budget Workgroup where his diplomacy skills guided the process with respect and success. He loved this job because he loved helping people. He never turned anyone away. He did all his work from the heart. He traveled many miles to speak on behalf of Healthcare. He presented a testimony on behalf of the Tribes at IHS and BIA hearings. Darryl was well respected throughout Indian country.
TRIBAL LEADERS IN HEALTH
One Mission: Healthy Families

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NIHB BOARD BIOGRAPHIES

Aberdeen Area Representative
Mr. John Yellowbird Steele (Pine Ridge, Oglala Sioux Tribe) is the newest member of the National Indian Health Board’s Board of Directors. In December of 2010 Mr. Steele was elected to serve as President of the Oglala Sioux Tribe, a role he has been elected to six times in the past eighteen years.

Alaska Area Representative-Secretary
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. hsmith@bbahc.org

Albuquerque Area Representative
Mr. Lester Secatero (To’Hajiilee - Canoncito Navajo), Mr. Secatero is currently the Chairman of the Albuquerque Area Indian Health Board, Incorporated and a member of the National Indian Health Board. He has been the Pastor of The Jesus Church at To’Hajiilee for the past twenty five years. Mr. Secatero has served the To’Hajiilee 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. ddale@aaihb.org

Bemidji Area Representative – Chairperson
Ms. Cathy Abramson 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. She 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 was 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 – Bawenting. 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 six beautiful granddaughters, and a beautiful grandson, 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. cabramson@saulttribe.net

Billings Area Representative
Mr. L. Jace Killsback, “Voaxaa’e Nestoohe” (Screaming Eagle) is a Northern Cheyenne Indian from Bushy, Montana and is a direct descendant of Chief Dull Knife.
Mr. Killsback is currently serving his second term as a Councilman for the Northern Cheyenne Tribe and is the Billing Area Representative for the NIHB Board of Directors. In 2002 L. Jace received his Bachelor 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 Killsback 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 member of the Native American 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. rfkillsback@yochedhe-nsn.gov

California Area Representative

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 Makaiwi (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 Appropriation 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. rffranklin@yochedhe-nsn.gov

Nashville Area Representative – Vice Chairman

Mr. Buford L. Rolin 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. Rolin 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. In 2007, he was awarded the NIHBI Jake White Crow Award. Mr. Rolin has served on many national organizations including the National Congress of American Indians (NCAI), the Atmore Area Partnership for Youth Board of Directors, and the Florida Governor’s Council on Indian Affairs. He has held various positions pertaining to the North 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. Rolin was appointed in 1998 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. Rolin was appointed to the White House Commission on Complimentary and Alternative Medicine Policy by President Bill Clinton. Mr. Rolin was appointed to NCAI Tribal Leaders Health Information Technology Task Force in 2001, by NCAI President Tex Hall. Mr. Rolin was elected Chairman. Mr. Rolin 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. Rolin is the Co-Chair of the Tribal Leaders Diabetes Committee (TLDC) as well as a member of the HIS Strategic Planning Committee. Mr. Rolin is currently the Vice Chairman of the National Indian Health Board. tlancaster@pci-nsn.gov

Navajo Area Representative

Mr. Rex Lee Jim, Vice President, Navajo Nation. After serving as a ranking member on the Judiciary Committee and chairman of the Public Safety Committee within the 21st Navajo Nation Council, Delegate Rex Lee Jim was sworn in as Vice President of the Navajo Nation on January 11, 2011. Born and raised in Rock Point, a small farming and ranching community in northern Arizona, Vice President Jim attended the local school.
where he learned to read and write in Navajo. He is of the Kin Lichii'ni clan born for Tachiinii. His maternal grandfather is Kin Yaa'anii and his paternal grandfather is Naatąąíí Diné’e. He has five children.

Vice President Jim attended the Newfound School in Asheville, North Carolina, and graduated from Colorado Rocky Mountain School in Carbondale, Colorado. In high school, he was introduced to students from other countries and gained much appreciation for their unique languages and cultures. After graduating from Princeton University, Vice President Jim started work with the Rock Point Community School teaching Navajo to students K-12. During this time, he developed a curriculum for K-Graduate programs that was culturally and pedagogically appropriate for Navajo students. He has published books and produced plays using the Navajo language. An author, playwright, and medical man, Vice President Jim continues to make diplomatic trips abroad on behalf of the United Nations to improve relations between nation states and indigenous peoples. As a representative of the Carter Foundation, the Vice President has helped improve relations between the United States of America and the Andean Countries of Colombia, Venezuela, Bolivia, Peru and Ecuador. Vice President Jim played a key role in the drafting and final passage of the International Declaration on the Rights of Indigenous Peoples. On 16 December 2010, President Barack Obama declared that the United States is going to sign the declaration. rxlcejim@yahoo.com

Oklahoma City 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 have 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. Tom.john@chickasaw.net

Phoenix Area Representative
Mr. Martin Harvier took office as Vice President of the Salt River Pima-Maricopa Indian Community (SRPMIC) in December 2006. As Vice President, Harvier supports improving education for Community members and creating opportunities for cultural preservation and promotion. He notes that the Pima were a peaceful people and believes these feelings could come back into the hearts of families if people know who they are. As Vice President, he will support educational and health-based programming that furthers these goals. Harvier grew up in Poston, Ariz., and when he was in the sixth grade, his family relocated to Sacaton, Ariz., where Harvier attended the Bureau of Indian Affairs School. He graduated from Casa Grande High School in 1977. When Harvier was 19 years old, his father was diagnosed with cancer, and in 1979 lost his battle with the disease. Martin Harvier became the sole support for his mother, three sisters and two brothers. He worked as a chain man on a survey crew for the Gila River Indian Community, and then as a plant mechanic and welder for a company located on the Salt River Indian Community for 11 years. In 1996, the SRPMIC hired Harvier as a civil tech soils tester. In 1998, he was promoted to plant manager of a water pump station, and until assuming the office of Vice President, served as the acting Irrigation Manager for the Community. In his spare time, he coached the Salt River High School baseball team for four years. Although he was not able to continue his education, Harvier has made a point of watching and learning by example. He is committed to treating people with respect and believes that you can tell a lot about someone by how he or she treats others. Harvier and his wife Toni are the proud parents of five children and one grandchild. When not working for the Community or involved with his family, Vice President Harvier is an avid sports fan.
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 (NPAIHB) 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 an at Large Executive NIHB Member. In addition, Andy represents NIHB on the SAMHSA Advisory Committee. Andy is also a voting delegate of ATNI, NCAI, 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 75th Airborne Ranger Battalion. I have been happily married 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.”
Andy.joseph@colvilletribes.com

NIHB STAFF BIOGRAPHIES

Stacy A. Bohlen (Sault Sainte Marie Tribe of Chippewa Indians) is the Executive Director of the National Indian Health Board, the only Tribal organization in the nation solely devoted to improving the delivery and status of health care to American Indians and Alaska Natives health care. Under Ms. Bohlen’s direction, the National Indian Health Board has played a critical role in establishing a Tribal presence for health care in the Nation’s Capitol, and promoted and strengthened the organization’s work to serve all federally recognized Tribes, American Indian and Alaska Native, in their work to improve the health of their People. Under Ms. Bohlen’s leadership, since 2007, the NIHB has significantly increased its budget, staff, connectivity to the Tribes and created and expanded programs, thereby increasing NIHB’s capacity to address critical needs and advance policy for American Indian and Alaska Native Health. She serves as the elected Chairman of the Board for the National Native American AIDS Prevention Center. A 24 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 Traxler. Ms. Bohlen was born and raised in Michigan and is an enrolled member of the Sault Sainte Marie Tribe of Chippewa Indians. sbahlen@nihb.org, cell phone: 202-680-2800

Evangelyn “Angel” Dotomain (Cup’ik/Inupiaq) is the Deputy Director of the National Indian Health Board (NIHB). Angel received her MBA in Health Services Administration from Alaska Pacific University. She completed her undergraduate education at Georgetown University McDonough School of Business in Washington, DC where she majored in International Business. Prior to her service to NIHB, she was the President/CEO of the Alaska Native Health Board. Ms. Dotomain has worked to increase the health status of Alaska Natives and American Indians through education programs, recruitment, and quality and process improvement at ANTHC. She and her family are from the villages of Merkoyuk, Mary’s Igloo, and Shaktoolik, Alaska. Edotomain@nihb.org, cell phone: 202-374-2034

Tyra Baer (Northern Cheyenne) is the Centers for Medicare & Medicaid Services (CMS) Project Assistant for the National Indian Health Board. She graduated
from Iowa State University (ISU) 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 and her fiancé, Kyle Wittenborn have a beautiful four year old daughter, Jaden Harper. Tbaer@nihb.org, cell phone: 804-627-2590

Tom Kauley is a member of the Kiowa Tribe of Oklahoma. He is currently serving as consultant on the National Indian Health Board’s National HITECH Center. He has over 25 years of experience in providing health and education services to American Indian and Alaska Native communities across the U.S. In his current role, he is overseeing the development and implementation of the only National HITECH Center designed to serve tribes located throughout 35 states. His information technology experience includes leadership roles in the development of enterprise IT business systems, health IT project management, and software business analysis. His health program experience includes management roles in the Indian Health Service, state agency and university program environments. Tom previously served as the Director of Operations for one of the Bill and Melinda Gates Foundation’s premier national education initiative, the Gates Millennium Scholars Program. He earned a BA in Communications at the University of Oklahoma and completed master’s level work at the same university. Tom is an active member of the Kiowa Tiah-Piah Society, a vital and traditional component of the social structure of his tribe that can be traced back to the early 1800’s and he plays an active role in carrying forth the stories and culture of this tribe. Tkauley@nihb.org, cell phone: 505-977-6053

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 & Rath 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 Bachelors of Arts degree from Colgate University. jcooper@nihb.org, cell phone: 202-680-4455

Paul R. Allis, a member of the Poole Tribe, is the Senior Public Health Project Manager of the National Indian Health Board (NIHB) and provides direct oversight and management of the public health related grants, contracts and activities. Mr. Allis joined the NIHB after working as a Regional Wellness Administrator for the Aleutian Pribilof Region of Alaska and other regions across Alaska. His extensive knowledge of implementing and providing comprehensive health care to AI/AN populations provide NIHB with service delivery issues in Indian Country. He completed his undergraduate and graduate education at the University of Alaska in Anchorage, Alaska where he majored in Social Work and Counselor Education. Pallis@nihb.org, cell phone: 202-812-2055

Shawn Sundance Leckey (Sicangu Lakota Oyate from the Rosebud Sioux Tribe) is serving as the Deputy Director of the National Indian Health Board’s National HITECH Center. He is also a former Marine, having been honorably discharged after 5 years of service. He worked in the Medivac Helicopter community and in the wake of 911 attacks on the US the position was restructured. Shawn utilized the Montgomery G.I. bill to assist him in graduating from Pennsylvania State University with a degree in Information Technology. As an IT professional, he consulted through TEK systems to plan and implement WiFi technology throughout the University of Pittsburgh’s main campus. He later held a full time position at the University of Pittsburgh computer services and systems development (CSSD) as a Telecommunications admin/engineer and Systems programmer II. slleckey@nihb.org, cell phone: 202-374-0760

Blake A. Harper serves as the NIHB public health project coordinator and provides comprehensive technical and program support assistance to all NIHB public health related grants, contracts and activities. Mr. Harper, a recent graduate of the George Washington University in Washington, DC with a Master of Public Health in Global Health, brings a fresh public health perspective to NIHB. In addition, he has served as the NIHB’s public health intern for the past year providing technical support, program support, and grants oversight to NIHB’s public health portfolio, aimed at strengthening public health capacity for AI/AN communities. Mr. Harper, originally from Texas, received his Bachelors of Science in Biomedical Science from the Texas A&M University in College Station, TX. bharper@nihb.org, cell phone: 202-297-5304
Liz Malerba (Mohegan Tribe of Connecticut) is the Legislative Assistant for the National Indian Health Board. Prior to joining NIHB, she spent more than three years as a staffer in the U.S. House of Representatives, serving most recently as Special Assistant to Chairman John Larson in the House Democratic Caucus. While with the Caucus, she was responsible for organizing and staffing the 47-Member Congressional Task Force on Seniors. Under Liz’s direction, the Task Force worked to advance issues of importance to older Americans, including introducing a Seniors Bill of Rights and crafting a message on the preservation of Social Security. She attended Allegheny College in Meadville, Pennsylvania, graduating with a B.A. in Women’s Studies. Liz grew up in Uncasville, Connecticut, and is an active member of the Mohegan Tribe. lflaterba@nihb.org, cell phone: 202-374-9966

Doneg McDonough is serving as a consultant to the NIHB on health reform implementation, particularly with regard to Federal regulatory actions. He has extensive experience in the financing, restructuring, and management of health systems and programs and the formulation of health policy. Prior to beginning the engagement with the NIHB, Doneg served as Legislative and Policy Director for a national coalition representing over 34 million Americans working to enact comprehensive health reform legislation. He is intimately familiar with Medicare, Medicaid, and other entitlement programs, having served as a Congressional staff member and having designed and implemented expansions and reforms as a state government official. He also serves as a technical advisor to CMS Tribal Technical Advisory Group. He earned a BA in Sociology at the University of California, Berkeley and a Master of Public Administration from Columbia University in New York. Dmcdonough@nihb.org

Carolyn Angus-Hornbuckle (Mohawk) serves as a Law Fellow in the Legislative Department of the National Indian Health Board. Ms. Hornbuckle graduated from the Sandra Day O’Connor College of Law at Arizona State University and was awarded her JD in 2009. During law school, Ms. Hornbuckle worked as an intern at the U.S. Attorney’s Office for the District of Arizona and at the Office of the Attorney General for Arizona. In her last year of law school, Ms. Hornbuckle worked as a student attorney for the ASU Civil Justice Clinic. After graduating, Ms. Hornbuckle interned at the Office of the General Counsel for the Salt River Pima-Maricopa Indian Community. Ms. Hornbuckle is of Mohawk descent. Chornbuckle@nihb.org

Bryce Roth (Lakota Sioux of the Standing Rock Reservation) is an Office Assistant for the National Indian Health Board. Bryce originally is from Oregon City, Oregon, a suburb of the greater Portland area. He has been working for the NIHB since 2008. Bryce has worked with other Native American organizations pertaining to healthcare and education. During the spring of 2005 and 2006, Bryce on behalf of the Pacific Northwest and the Native American Youth Association, attended the Jane Goodall Ecology of War and Peace in St. Petersburg, Russia. Bryce participated in the Christian Appalachian Project in Eastern Kentucky in 2009. Participants repaired, and built homes while positively influencing the impoverished Appalachian region. broth@nihb.org, cell phone: 202-704-0884
Paul R. Allis, a member of the Poole Tribe, is the Senior Public Health Project Manager of the National Indian Health Board (NIHB) and provides direct oversight and management of NIHB's public health related grants, contracts, and activities. Mr. Allis joined the NIHB after working as a Regional Wellness Administrator for the Alutiiq Pribilof Region of Alaska and other regions across Alaska. He has extensive knowledge of implementing comprehensive health care programs to AI/AN populations. He completed his undergraduate and graduate education at the University of Alaska in Anchorage, Alaska where he majored in Social Work and Counselor Education. Pallis@nihb.org

Annabelle M. Allison, a member of the Navajo Nation, serves as the Tribal Liaison for CDC's National Center for Environmental Health and Agency for Toxic Substances and Disease Registry (NCEH/ATSDR). Annabelle has been with the NCEH/ATSDR Office of Tribal Affairs (OTA) since April 2008. Her responsibilities include serving as a liaison between the NCEH/ATSDR divisions and American Indian/Alaska Native (AI/AN) tribes across the country. Annabelle was formerly employed with Northern Arizona University's Institute for Tribal Environmental Professionals (NAU ITEP). In her tenure at NAU ITEP, she provided training to tribes across the U.S. on air quality topics. From 2005 to 2007, she worked the EPA's Office of Air Quality Planning & Standards (OAQPS) in Research Triangle Park, NC, where she worked as a liaison for technical and policy issues with tribes and EPA. She received her B.S. degree in Biology from the University of New Mexico in 1994. Hhd4@cdc.gov

Patrick M. Anderson is the Executive Director of Chugachmiut, a Tribal organization serving the Chugach Native peoples of Alaska. He is Tlingit Indian (Eagle moiety, Thunderbird Clan, from Yakutat) and Alutiq (from Cordova). Patrick serves on the boards of Sealaska Corporation, the Alaska Native Justice Center (Chairman), and as a Commissioner on the Alaska Native Justice and Law Enforcement Commission. Patrick also serves as co-chair of the Alaska Federation of Natives Human Resource Committee, as Parliamentarian for the National Congress of American Indians and the Alaska Federation of Natives. A 1975 graduate of the Princeton University Woodrow Wilson School of Public & International Affairs and a 1978 graduate of the University of Michigan Law School, Patrick has been an attorney in Alaska since 1978.

Stephenita Apokedak is a fifth-semester student in University of Alaska Anchorage's School of Nursing from the Yupik village of Levelock in Bristol Bay. She will earn her BS degree in December, 2011. Stephenita is very active in the Recruiting and Retention of Alaska Natives into Nursing program, including assisting with recruitment efforts at the Bilingual/Multicultural Education Equity Conference. saapokedak@alaska.edu

John Baker was born, raised and lives in Kotzebue, Alaska. A dog musher, pilot and motivational speaker, he enjoys living and training in Arctic Alaska. Baker's family has embraced dog mushing and sled dog racing as a way of life. A person's character is often shaped by their background and life experiences and John Baker has plenty to tap into. With an eagerness to learn from the Inupiat elders about the land and animals – especially dogs – Baker has applied this knowledge while innovating to help him and his dog team steadily improve reflecting the ingenuity and adaptability of the people who have lived in the Arctic for thousands of years. John loves exploring the arctic wilderness and can be seen throughout the region in his Cessna 206 airplane or on his dog team. John Quniaq Baker is proud of his Inupiat heritage and has acquired a tremendous amount of knowledge from traditional elders about the land, weather patterns, ice and snow conditions, and sled dogs. Throughout the long winter months he applies this wisdom to guide him through extreme conditions in which he and his dogs train. While Baker is keenly aware of and regularly taps into the traditional knowledge of his ancestors who have had relations with dogs for generations, he also enjoys bringing new innovations to those with whom he shares a love for the art of sled dog racing.

Terry Batliner, DDS, MBA is the Associate Director for University of Colorado's Center for Native Oral Health Research and Owner of Sage Dental Care. Terry is a member of the Cherokee Nation of Oklahoma with family roots in eastern Oklahoma. Dr. Batliner has held senior leadership positions at Delta Dental, The Department of Veterans Affairs, Harvard Pilgrim Health Care and
the Indian Health Service. He received his DDS and MBA degrees from the University of Iowa and holds the designation of certified professional in health care quality. Terry is a practicing dentist working part time in private practice in the Denver area. Terry.batliner@ucdenver.edu

Lincoln A. Bean, Sr. is the Chairman of the Board of Directors for the Alaska Native Health Board (ANHB), which is recognized as the statewide voice on Alaska Native health issues. ANHB represents 25 Alaska tribal health organizations which consist of 231 federally recognized tribes employing over 7,000 Alaskans, and it provides services to over 130,000 Alaska Natives. These 25 organizations work together as an integrated statewide health system to provide quality services to all Alaska Native people. Chairman Bean serves as an advocate for issues such as funding, legislation, and regulatory issues, all of which are of great importance to ANHB, the Alaska tribal health system, and the Indian Health Service. The Alaska Tribal Caucus has appointed Mr. Bean to serve as the Alaska Area Representative on national Facilities Appropriations Advisory Board and national Tribal Leaders Diabetes Committee. Mr. Bean also serves as a board member for the SouthEast Alaska Regional Health Consortium. Chairman Bean is Southeast Alaska Tlingit Indian and an enrolled member of the Organized Village of Kake, a shareholder of the Kake Tribal Corporation and Sealaska Corporation. Chairman Bean has spent much of his life subsisting off the land and sea and has worked in logging and construction in the village.

Carlyle Begay (Navajo) has focused the majority of his efforts on services related to Indian health and Indian health program development. He has experience in the management of health care organizations, managed care, health care market structure, and health care delivery. He has a keen understanding of how public policy actions affect costs, quality, and access, in the Indian health and public health care sectors. He has a grasp of how a variety of management approaches can be applied to a wide spectrum of health care delivery settings.

Roselyn Begay (Navajo), Acting Division Director, has been working with the Navajo Nation for 20 years. She also directs the Office of Planning, Research and Evaluation under the Executive Navajo Department Of Health Administration. Ms. Begay works closely with the Navajo Nation Office of the President and Vice President, Council, and Health, Education, and Human Services Committee of the legislative branch. Ms. Begay is instrumental in health policy and staff development, her leadership and interest in performance improvement results in Federal grants and strategic plans to transformation to improve health status with the development of the Navajo Department of Public Health. She serves on the national CMS Tribal Technical Advisory Group (TTAG), prepares for Tribal Consultations and Federal and Tribal Technical Workgroups. She attended Colorado State University and is from the community of Many Farms, Arizona.

Judith Bendersky is a Health Program Manager with the State of Alaska. She is the Director of the Medicare Information Office which houses two federal grants; including, the State Health Insurance Assistance Program (SHIP) and Senior Medicare Patrol (SMP). Judith has a Masters in Public Health and is a Gerontologist. She has worked in public health in Alaska for 20 years including five years at the Alaska Native Medical Center, the Rural Alaska Community Action Program and the State. She has maintained positive working relationships with many rural and Alaska Native communities throughout her years of public service.

Donald M. Berwick, MD, MPP, is the Administrator for the Centers for Medicare and Medicaid Services (CMS). As Administrator, Dr. Berwick oversees the Medicare, Medicaid, and Children’s Health Insurance Program (CHIP). Together, these programs provide care to nearly one in three Americans. Before assuming leadership of CMS, Dr. Berwick was President and Chief Executive Officer of the Institute for Healthcare Improvement, Clinical Professor of Pediatrics and Health Care Policy at the Harvard Medical School, and Professor of Health Policy and Management at the Harvard School of Public Health. He also served as a consultant in pediatrics at Massachusetts General Hospital and adjunct staff in the Department of Medicine at Boston’s Children’s Hospital. Dr. Berwick has served as Chair of the National Advisory Council of the Agency for Healthcare Research and Quality, and as an elected member of the Institute of Medicine (IOM). He also served on the IOM’s governing council from 2002 to 2007. In 1997 and 1998, he was appointed by President Clinton to serve on the Advisory Commission on Consumer Protection and Quality in the Healthcare Industry. Dr. Berwick is the recipient of numerous awards and honors for his work, including the 1999 Ernest A. Codman Award, the 2001 Alfred I. duPont Award for excellence in children’s health care from Nemours, the 2002 American Hospital Association’s Award of Honor, the 2006 John M. Eisenberg Patient Safety and Quality Award for Individual Achievement from the National Quality Forum and the Joint Commission on Accreditation of Healthcare Organizations, the 2007 William B. Graham Prize for Health Services Research, and the 2007 Heinz Award for Public Policy from the Heinz Family Foundation. Dr. Berwick is a pediatrician and holds a Master in Public Policy degree from the John F. Kennedy School of Government. He received his medical degree from Harvard Medical School, where he graduated cum laude.

P. Kay Branch, MA 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 and people with disabling conditions. She has over 15 years of experience working with Alaska Native elders, including Older Americans Act programs, home and community-based and facility-based service development. Under agreement with the Indian Health Service, Ms. Branch provides technical assistance in long term care service development to IHS Elder Care Grantees. In addition she is a member of the CMS Tribal Technical Advisory Group’s Long-Term Care Subcommittee. Ms. Branch 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. pkbranch@anthc.org

Brec Bussey (Anishinaabe and Mohawk) currently works for the American Indian Community Housing Organization in Duluth Minnesota as the coordinator of Dabinoo’Igan Shelter, a Native-specific shelter for women who have been battered. Brec earned her MSW in 2004 and has worked with Native families for 12 years. She also works with the Center for Regional and Tribal Child Welfare Studies in Duluth as a consultant and the Department of Human Services in Minnesota as a curriculum trainer. brec@aicho.org

Jay C. Butler, MD is Senior Director at the Division of Community Health Services at Alaska Native Tribal Health Consortium, and is the Health Research Advisory Committee Alaska Alternate. Prior to joining the Consortium, he was Director of the H1N1 Vaccine Task Force at the Centers for Disease Control and Prevention, and he was Chief Medical Officer of Alaska. Earlier assignments have included serving as Alaska State Epidemiologist, Director of CDC’s Arctic Investigations Program, and medical epidemiologist in CDC’s National Center for Infectious Diseases. He is a graduate of the University of North Carolina Medical School. jbutler@anthc.org

Callan Chythlook-Sifsof was raised in rural Alaska, 500 miles away from the nearest chairlift in one of the most remote areas in North America. She started snowboarding when she was seven on a small hill behind her grandpa’s house, advancing to nearby peaks, following her big brother and family up and down mountains on snowmachine. Her progression was somewhat backwards, as she spent her first years on a snowboard in the Alaskan backcountry and later moved to a ski resort with her family when she was 12, where formal training and competition began. She is a Boardercross (SBX) and hard boots/gates specialist. In 2006, she earned a berth on the U.S. Snowboard Team. She landed on the podium in her first World Cup snowboardcross in Japan, taking the Bronze medal. The same season brought a double title of 2007 U.S. National Champion and Junior National Champion in Boardercross and a 4th-place in World Cup Finals. She was a member of the 2010 Winter Olympics Team.

Cynthia Claus, PhD, MPH, has extensive experience in working nationally/locally in partnership with American Indian/Alaska Native communities throughout the Indian health “I/T/U” system. Her background and experience has included planning, implementing, and evaluating health prevention education and care/treatment programs addressing HIV/AIDS, diabetes and cancer. Her research interests/experience has focused on addressing health disparities in Native American communities by utilizing community-based participatory research (CBPR), including, interventions that promote culturally responsive health education and health promotion. She is an enrolled member of the Kiowa Tribe of Oklahoma and the Mohawk Nation of the Six Nations on the Grand River, Ontario, Canada. cynthia.claus@ihs.gov

Randal Comb is the Train Instructor at the Navajo Nation Special Diabetes Project and an enrolled member of the Diné (Navajo) Tribe living in Lupton, AZ. Comb received his undergraduate education from the University of New Mexico and Central Arizona College in Community Health Education. His experience and training have allowed him to take various assignments with the Navajo Nation’s Division of Health Programs, as well as IHS programs for Chinle, Kayenta, Fort Defiance, and Window Rock, Arizona. He has worked with the Navajo Nation for approximately 20 years and serves on a variety of national and local committees to advocate for health promotion and disease prevention. r.comb@nmsdp.org

James Allen Crouch, MPH, 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 Californian Pan Ethnic Health Network. Other Board and Advisory affiliations include The National Rural Health Association, California Task group on Multicultural Competence, California Telehealth/Telemedicine Coordination Project; the California Health Information for Policy Project; the Cherokees of Northern California Club and the American Leadership Forum. He has served on numerous advisory groups to the 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. James.crouch@CRIHB.NET

**Christi Dant** serves in the Administrative Simplification Group in the Office of E-Health Standards & Services at the Centers for Medicare and Medicaid Services where one of her key responsibilities is outreach to the federal sector on ICD-10. Prior to joining CMS in September 2010, Ms. Dant had a consulting practice primarily focused on public health and health information technology and exchange. Christi served as a reviewer and chair for a variety of HRSA and HHS grant programs and provided technical assistance to HRSA Section 330 grantees. From 2000 – 2002, Ms. Dant worked at HRSA in the Bureau of Primary Health Care as a public health analyst and project manager for the Community Access Program. She earned a Masters in Public Management from East Tennessee State University in 1999 and entered federal service with the Social Security Administration as a Presidential Management Fellow. Prior to graduate studies, Ms. Dant worked in local and state governments in Connecticut, South Dakota, and Minnesota and maintains a keen interest in supporting initiatives focused on rural, Tribal, and frontier areas.

**Valerie Davidson**, an enrolled tribal member of Orutsararmuit Native Council, is the Senior Director of Legal and Intergovernmental Affairs for the Alaska Native Tribal Health Consortium, a statewide tribal health organization based in Anchorage, Alaska. Val has been the spokesperson, chief political and legal strategist for ANTHC’s Dental Health Aide Therapy Program. Val served as a member of the National Steering Committee for the Reauthorization of the Indian Health Care Improvement Act. She previously served as a member of the National Title V Negotiated Rulemaking Committee for Title V of the Indian Self-Determination and Education Assistance Act (2001–2002). Since 2002, she has served as Co-Lead Negotiator for Alaska’s 229 federally recognized tribes to negotiate the Alaska Tribal Health Compact for health services for Alaska Natives and American Indians in Alaska. She is 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. She also serves on the Alaska Health Care Commission established by Governor Parnell to develop a comprehensive statewide health plan for Alaska. Most importantly, and bringing her the greatest joy, Val enjoys spending time at home with her niece, nephew, and two daughters. vdavidson@anthc.org

**Maxim Dolchok** is proud of being active with FWI as a speaker, group leader, storyteller, and the current chair of the Family Wellness Warrior Initiative steering committee. He has worked with FWI for over 10 years. Max is also extremely proud of being married to his wife, Lisa, for over 50 years, and being father of four, grandfather of eight, and great-grandfather of four. Originally from Kenai, Alaska, Max is of Kenaitze descent. madolchok@scf.cc

**Chinyere O. Ekechi** is a Public Health Analyst at the National Center for Environmental Health/Agency for Toxic Substances and Disease Registry (NCEH/ATSDR) at the U.S. Centers for Disease Control and Prevention (CDC). The center works to improve the health of the American people by promoting a healthy environment, as well as preventing premature death and avoidable illness and disability caused by environmental hazards. Her work in environmental public health policy focuses on global health, healthy homes, environmental justice, chemical policy and healthy community design. She currently serves as a lecturer at Morehouse School of Medicine in Atlanta, GA, where she teaches Public Health Law. She holds a Bachelor of Science degree in Integrated Life Sciences from Kent State University and a Juris Doctorate from Georgetown University Law Center.

**Hilary Forster, MPP**, is a Presidential Management Fellow at the Office of Planning, Research and Evaluation (OPRE), in the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services. She currently serves as a Project Officer for several components of ACF’s multi-pronged evaluation strategy for the Health Profession Opportunity Grants (HPOG) program, including: Evaluation of the Tribal HPOG; HPOG Implementation, Systems and Outcome Evaluation; University Partnership Research Grants for HPOG; and HPOG Research Support. Prior to her
service at HHS, she worked for six years as a Research Analyst at the American Institutes for Research (AIR) in the Education, Human Development, and the Workforce Program. She received her M.P.P, with a concentration in Education, Social and Family Policy, at the Georgetown Public Policy Institute and graduated summa cum laude from Georgetown University with a B.A. in Psychology.

Edward Fox, Ph.D, since July 2011 has served as the Port Gamble S’Klallam Tribes’ Director of Health Services. He was employed at Northwest Portland Area Indian Health Board for 10 years, first as their policy analyst before his appointment as the Executive Director in 2000 (to 2005). In 2006 he assisted Nevada Tribes establish the Indian Health Board of Nevada where he served as its first Executive Director. He returned to the Northwest in 2006 and has worked for the Squaxin Island Tribe, first as Assistant Director of Health and Human services, then as the Tribes’ Health Clinic Director. Ed worked for Kaufman and Associates from July 2010 to July 2011. He has served on many state and national health care policy workgroups including the CMS Tribal Technical Advisory Group, IHS budget formulation, IHS Contract Health, and the IHS Indian Health Care Improvement Fund Data workgroups. He has received his PhD in political science at the University of Washington, Seattle.

Vicki French serves as the Meaningful Use Lead for the National Indian Health Board’s Regional Extension Center project. She is responsible for understanding the requirements of the CMS EHR Incentive Programs, developing training materials and resources, providing training on meaningful use, and promoting the Regional Extension Center. Before joining this project, Vicki worked as a Tribal Data Coordinator on United South and Eastern Tribes, Inc. GPRA Pilot Project, focusing on USET’s data quality and collection efforts. Her previous experience includes coordinating projects for nonprofit organizations and managing a federal grant program through a state governmental agency. Vicki.French@ihs.gov

Robert Foley has worked in the prevention field for the past 11 years, including community-based assessment, social marketing, and intervention planning for domestic violence, substance abuse, and STD/HIV. He is currently the President/CEO of the National Native American AIDS Prevention Center (NNAAPC) where he manages programs delivering technical assistance, advocacy, and training to Native communities combating HIV. Previously, Mr. Foley worked within a sixteen state region to deliver trainings on evidence-based prevention. Prior, he was a research assistant with the Tri-Ethnic Center for Prevention Research where he examined substance use and domestic violence prevention in rural, ethnic, and tribal communities.

Tony Aaron Fuller (Colville) is a capacity building assistance specialist with the National Native American AIDS Prevention Center. He works with tribes and organizations to provide assistance and training to implement effective HIV prevention strategies – especially social marketing efforts. Mr. Fuller came to NNAAPC from the HIV Alliance in Eugene, Oregon where he managed the HIV counseling and testing program, HIV interventions, and oversaw the needle exchange program. Prior to Eugene, he worked as an anchor/reporter for an NBC Affiliate in Bend where he was a two-time award recipient for a piece investigating stigma for people living with HIV in rural Oregon.

Charles Galbraith, Associate Director in the White House Office of Public Engagement and has most recently served as a Deputy Associate Counsel for Presidential Personnel in the White House. He has also previously worked as an Assistant United States Attorney for the District of Arizona and as a Legislative Assistant to United States Senator Tim Johnson of South Dakota. During the Obama Campaign for Change, Galbraith served as the Convener of the Native American Domestic Policy Committee organizing a nationwide group of tribal leaders and activists in developing policy proposals for the campaign. Galbraith is an enrolled member of the Navajo Nation, received his undergraduate degree from the University of Chicago, and graduated from the Arizona State University College of Law. During law school, Galbraith served as the Vice-President of the Native American Law Students Association and clerked for the Native American Rights Fund in Washington, DC. Charles_W_Galbraith@who.cop.gov

Jacqueline S. Garner joined the Centers for Medicare and Medicaid Services (CMS) as the Chicago Regional Administrator in May 2003. She came to the Region V office with over twenty years of experience in health and human services at the state and national level. In 2007 Jackie was named as a Consortium Administrator within CMS, with oversight of the ten Medicaid divisions in CMS’ Regional Offices. She is a recipient of the 2007 Meritorious Executive Award in the Senior Executive Services. In 2009 she served as the Acting Deputy Director for the Centers For Medicaid and State Operations during the transition between Administrations. Garner also served as a member of the Governor’s cabinet in Illinois for the state Medicaid and S-CHIP agency. There she had responsibility for approximately three thousand employees, focusing the Department’s efforts on program enhancement, program integrity and fiscal accountability. jackie.garner@cms.hhs.gov

Cyndi Gillaspie is the Technical Director for AI/AN Policy for Medicaid and CHIP and the Lead Native American Contact (NAC) for the CMS Regional Offices. Since May, 2009, Cyndi has also been working with the Centers for Medicaid and State Operations to
assist with policy development and implementation of provisions of the Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA), the American Recovery and Reinvestment Act of 2009 (the Recovery Act) and the Affordable Care Act. These new laws have key provisions related to AI/AN people and Indian health providers. Before serving as the Lead NAC, Cyndi served as the Region VIII NAC, CMS Medicaid State Lead for Colorado, South Dakota, Utah and Wyoming and the CHIP Lead for all 6 Region VIII States. Prior to coming to work for CMS in 1998, Cyndi worked in the State of Wyoming as a County Caseworker, County Eligibility Supervisor and State Medicaid Consultant for 12 years. Cynthia.Gillaspie@cms.hhs.gov

Howard Hays, MD, MSPH, Phoenix Indian Medical Center, Phoenix, AZ. Dr. Hays is responsible for coordinating and directing development of the IHS-EHR suite of applications, and for creating a program that will sustain the EHR and support sites that implement it. Howard.Hays2@ihhs.gov

Priya Helweg has a Masters in Anthropology from the University of British Columbia. She spent the last 13 years in Washington, DC where she worked as an Anthropologist for the Smithsonian Institution and managed programs in Leadership Development and Health Policy for the Henry J. Kaiser Family Foundation and Morris K. Udall Foundation. Priya was the Director of Communications and Development for the National Council of Urban Indian Health before joining the Centers for Medicare & Medicaid Services in 2005. At CMS she provided technical assistance, outreach and training to AI/AN communities, support for the Tribal Technical Advisory Group, and served as a subject matter expert for the newly formed Tribal Affairs Group. Priya moved to the Seattle Regional Office Division of Medicaid and Children’s Health Operations in November 2007. She currently works in the Office of the Regional Administrator where she conducts outreach and training on CMS initiatives.

Mary Reece Hobson currently works in the Recruitment and Retention of Alaska Natives into Nursing program with the prenursing majors. She earned a University of Alaska Anchorage BA degree in Secondary Education; Social Studies with a minor in Political Science. She has an extensive background as a UAA Native political activist, was chosen as Minority Student of the Year in Alaska; was an intern in Senator Ted Stevens’ DC office; was appointed to the UA Board of Regents in 1990 by Governor Cowper; and was the Student of the Year within her Bristol Bay Native Corporation.

Gregory S. Holzman, MD, MPH, is the Associate Deputy Director for CDC’s Office for State, Tribal, Local and Territorial Support (OSTLTS). In this position, Dr. Holzman shares with the OSTLTS Director the responsibility to provide strategic leadership on a broad spectrum of activities to improve the capacity and performance of public health systems in addressing the public health and safety needs of people living in the United States. Prior to joining CDC, Dr. Holzman served as Chief Medical Executive for the Michigan Department of Community Health, Associate Professor in the Department of Family Medicine at Michigan State University, and Adjunct Associate Professor in Health Management and Policy at the University of Michigan’s School of Public Health. Dr. Holzman is board certified in both family medicine and preventive medicine. A graduate of the University of Florida’s College of Medicine, he completed his family medicine residency in Charlotte, NC, and his preventive medicine residency in Seattle, WA. He worked in residency education and clinical medicine at the Central Maine Medical Center’s Family Practice Residency Program. Before completing his second residency in preventive medicine, he worked on the Blackfeet Indian Reservation in Browning, MT.

Pamela Hyde, Esq. was nominated by President Barack Obama and confirmed by the U.S. Senate in November 2009 as Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA), a public health agency within the Department of Health and Human Services. The agency’s mission is to reduce the impact of substance abuse and mental illness on America’s communities. Ms. Hyde is an attorney and comes to SAMHSA with more than 30 years experience in management and consulting for public healthcare and human services agencies. She has served as a state mental health director, state human services director, city housing and human services director, as well as CEO of a private non-profit managed behavioral healthcare firm. In 2003 she was appointed cabinet secretary of the New Mexico Human Services Department by Governor Bill Richardson. Ms. Hyde is a member of or has served as a consultant to many national organizations, including the John D. and Catherine T. MacArthur Foundation, the American College of Mental Health Administration, the President’s New Freedom Commission on Mental Health and the United States Department of Justice. She has been recognized by many groups, including the American Medical Association, the National Governor’s Association and the Seattle Management Association, for her creativity and leadership in policy and program development and in organizational management issues. She has received special acknowledgment for her ability to build teams, develop coalitions and consensus, develop strategic plans and form the basis for action and achieve identified goals in a constantly changing environment. Ms. Hyde received her JD from the University of Michigan Law School (1976) and her B.A. from Southwest Missouri State University (1972).
Tom Kauley (Kiowa) is currently serving as the Interim Director on the National Indian Health Board’s National HITECH Center. In his current role, he is overseeing the development and implementation of the only National HITECH Center which is designed to serve tribes and urban Indian clinics located throughout 35 states. His information technology experience includes leadership roles in the development of enterprise IT business systems, health IT project management, and software business analysis. His health program experience includes management roles in the Indian Health Service, state agency and university program environments. Tom previously served as the Director of Operations for one of the Bill and Melinda Gates Foundation for the Gates Millennium Scholars Program. He earned a BA in Communications at the University of Oklahoma and completed master’s level work at the same university. Tkauley@nihb.org

Carol Korenbrot, PhD is the Research Director at the California Rural Indian Health Board (CRIHB). She began working with CRIHB in 1998 while a professor at the University of California San Francisco, School of Medicine, Institute for Health Policy Studies. In 2005 she left the university to become its Research Director and work exclusively with CRIHB. With CRIHB, Dr. Korenbrot established the California Tribal Epidemiology Center and a Native American Research Center in Health for health services and health policy research. Studies done with CRIHB have documented the disparities in mortality, morbidity and Medicaid funding, and demonstrated that the more Indian Health Service (IHS) funding that a California Tribal Health Program had, the lower the number of preventable hospitalizations of the California Indians who relied on the program. Two of the studies done with CRIHB received awards, one from the IHS and the other from the Academy Health, the national association for health services and health policy research. Carol.Korenbrot@CRIHB.NET

John L. Johns, JD, joined the Centers for Medicare & Medicaid Services (CMS) in October 2009 and works with the Tribal Affairs Group (TAG). Prior to joining CMS, Mr. Johns was a Federal Regulations and Policy Analyst for the National Indian Health Board (NIHB) in Washington, DC. He received a Bachelor of Science degree in Political Science from Georgia College and State University and a Juris Doctor degree from the University of North Dakota (UND) School of Law. While attending law school, Mr. Johns served twice as a legal intern with the U.S. 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. Mr. Johns also worked as a law clerk for the Tribal Judicial Institute (TJI) at the UND. He is an enrolled member of the Monacan Indian Tribe of Virginia. John.Johns2@CMS.hhs.gov

Ray Baldwin Louis is the Public Information Officer for the Navajo Nation Special Diabetes Project, and has been with the Program for six years. Louis has a Bachelor of Arts Degree in Journalism Communications from Brigham Young University and has worked in that field for the past 35 years. He served as Public Relations Associate with the Navajo Film and Media Commission which was responsible for laying the ground work for the “Voice of the Navajo Nation” KTNN radio in Window Rock, Arizona; He served as the Press Secretary for Peterson Zah, Former Chairman of the Navajo Nation, and also served as Press Officer for Zah when he was President during his second term. He worked as Press Officer for President Kelsey A. Begay and as Public Relations Associate for Grey Hills Academy in Tuba City, Arizona. He taught journalism, drama, English and Reading at Navajo Pine High School for six years and also was Adjunct Professor for the University of New Mexico. R.louis@nnsdp.org

Cheryl Lovegreen grew up in the Anchorage area, taught in Alaska for twenty years, and earned two education degrees from UAA. She is pleased to help others navigate the journey to their own graduations. Cheryl’s responsibilities include the RRANN Anchorage nursing majors and RRANN statewide majors students from Southcentral Alaska. ancll1@uaa.alaska.edu

Ken Lucero is a member of the Pueblo of Zia. Mr. Lucero has actively served on the Tribal Council since his appointment as a Governor’s Official in 1999. He is currently the Director of the RWJPC Center for Native American Health Policy at the Indian Pueblo Cultural Center. The Center is a collaborative effort of the Robert Wood Johnson Foundation Center at UNM, the University of New Mexico Health Sciences Center, and the Indian Pueblo Cultural Center. Mr. Lucero currently serves on numerous health-related boards and committees at the Local, State and National Level. Locally, Mr. Lucero currently serves on the All Indian Pueblo Council’s Health Committee, and is the Zia Pueblo representative to the Indian Health Service Albuquerque Service Unit Indian Health Board. In the State of New Mexico, Mr. Lucero Co-chairs the Department of Health’s American Indian Health Advisory Committee, and has participated on the State-Tribal Consultation Protocol Development Workgroup, and the Indian Affairs Department Legislative Bill Analysis Workgroup. Nationally, Mr. Lucero is a member of the Direct Service Tribes Advisory Committee (DSTAC). His latest appointment is to the US HHS Secretary’s Tribal Health Advisory Committee.

CAPT Jim Lyon (Cherokee) began his federal career with the Indian Health Service as a graduate extern at
the Shawnee Service Unit in June 1985. He has served in various supervisory and administrative health care positions with the Indian Health Service, the Federal Bureau of Prisons, and the Centers for Medicare & Medicaid Services. He is currently a Health Insurance Specialist with the Tribal Affairs Group, Centers of Medicare and Medicaid Services. Jim.Lyon@CMS.hhs.gov

Annette Mendez has been the Clinic Manager for the Yavapai-Apache Nation’s Health Center for the past seven years. She had previously worked at the Phoenix Indian Medical Center for 11 years. She has been a member of the study’s Community Advisory Group and provided valuable information in the development and implementation of the project. She is currently pursuing a degree in business health management. She is a member of Yavapai-Apache Nation and the Tohono O’odham Nation. amendez@yan-medical.org

Michael Mcit serves as Program Area Director in NORC’s Public Health Research department, and as Co-Director of the National Opinion’s Research Center Walsh Center for Rural Health Analysis. Michael has nearly 20 years of experience as a health services researcher and program manager. He has conducted numerous studies for HRSA, CDC, AHRQ and others, and is lead investigator for the HRSA Office of Rural Health Policy Outreach Tracking and Evaluation project, and the ACF Tribal Health Professions Opportunity Grants program evaluation. He served as the founding director of the University of Pittsburgh Center for Rural Health Practice. He is a past member of the National Advisory Committee for Rural Health and Human Services, and currently serves on the Board of Trustees of the National Rural Health Association.

Elliott Mihollin, JD, began his career in Indian law while clerking for the firm during college and law school. After practicing law at two of the country’s largest law firms, he returned to his roots at Hobbs Straus in 2003 and became a partner in 2006. Recently, he assisted other attorneys in the firm file an amicus curiae brief in the Eleventh Circuit Court of Appeals on behalf of tribes and tribal organizations representing nearly 350 tribes seeking to uphold the Indian Health Care Improvement Act and Indian-specific provisions of the Affordable Care Act. Elliott received his JD (cum laude) from the University of Wisconsin Law School in 1999, where he was the Editor-in-Chief of the Wisconsin Environmental Law Journal. He graduated with a Bachelor of Arts with High Honors from the University of Michigan in 1993. EMilhollin@hobbsstraus.com

Lloyd B. Miller is a partner in Sonosky Chambers Sachse Miller & Munson, LLP, where a large part of his law practice involves assisting tribal health care providers. He was deeply involved in legislative work leading to the 1988, 1994 and 2000 Indian Self-Determination Act Amendments, and has led much of the ensuing litigation to enforce tribal contract rights under self-determination contracts. He successfully litigated the 2005 Supreme Court Cherokee-Shoshone litigation, secured a $44 million recovery against IHS in 2007, and is currently litigating new contract cases in the appellate courts and the Supreme Court. Lloyd@sonosky.net

Richard D. Monkman joined the firm of Sonosky, Chambers, Sachse, Endreson & Perry, LLP in 2003 and became a partner in 2007. He represents tribal organizations in all aspects of their healthcare operations, including Medicaid and Medicare compliance matters; negotiations and litigation with the Indian Health Service and other federal and state authorities; and medical employment, licensing and credentialing issues. Mr. Monkman advises on state and federal health care law, drafting and interpretation of medical staff bylaws, and accreditation. He frequently represents Tribes and tribal organizations in healthcare related litigation. dick@sonoskyjuneau.com

Myra Munson, JD, MSW, has been a partner in the Law Firm of Sonosky, Chambers, Sachse, 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 TTAG, has worked with the IHICIA 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 IHS programs. Myra@sonoskyjuneau.com

Diana Murat is part Yup’ik Eskimo, Russian, English and Irish. She is enrolled as a tribal member of the Orutsararmuit Native Council in Bethel, Alaska, and is an enrolled descendent of the Calista Regional Corporation. Diana is the Director of the HOPE department, which stands for Healthcare Outreach Programs and Enrollment. The department does outreach for Medicaid, Medicare and Denali Kidcare enrollment for the Yukon Kuskokwim Delta Regional Hospital in Bethel, Alaska providing service for 56 villages. She has worked for YKHC for 10 years; originally hired as the Dental Business Manager for 1 yr, then as the Director of Business Management in which she helped initiate the Pharmacy billing department where she worked for 6 years. She was then moved to Revenue Management as the Health Information Statistician for six months, before she was asked to take over the Medicaid Enrollment department in May of 2009.

Kyle Newman, of Yup’ik and Norwegian descent, was born in Bethel, Alaska. He has served as a member of Family Wellness Warriors Initiatives’s outreach team for...
six months, and previously worked at The Pathway Home, Southcentral’s Foundation’s residential treatment program for adolescent males. He enjoys his work and is grateful to be a part of the effort to help his Native Community achieve physical, mental emotional and spiritual wellness.

knewman@scf.cc

Ramona Antone Nez, (Navajo/Iroquois Oneida), MPH, BSN, Principal Planner, works on program planning, research, evaluation, performance improvement, grant development and policy development with Tribal health systems. She lives with her family in Navajo, New Mexico.

Teresa Niño was named Director to the newly created Office of Public Engagement for the Centers for Medicare and Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS) on April 19, 2011. In that role, she oversee the Medicare Ombudsman’s Group, Tribal Affairs, Emergency Preparedness and Response, and the Partner Relations Group. Ms. Niño joined CMS in May of 2009 as Director of the Office of External Affairs and Beneficiary Services (OEABS) where she guided 280 employees and managed a $550M budget to successfully achieve the strategic communication objectives that promote the vital health care for more than 90 million Medicare and Medicaid beneficiaries. She first moved to Washington, DC in 1993 to serve as Secretary Donna E. Shalala’s Director of Outreach for HHS in the Clinton Administration. Teresa.Nino@CMS.hhs.gov

Jackie Pflaum as an itinerant public health nurse in the Yukon Kuskokwim region before joining the University of Alaska Anchorage faculty in 1979, Jackie Pflaum has held a variety of positions within the School of Nursing in the last 30 years, and is now the Associate Vice Provost for Health Programs Development. jspflaum@uaa.alaska.edu

Madan Poudel, PhD, Health Services Administrator has been working with the Navajo Nation for 20 years. His vision of the proposed Navajo Department of Public Health will enhance the public health, prevention of infectious disease, accidents, trauma and disabilities, protect environmental health, promote healthy life styles and monitor the health of the Navajo Nation. Dr. Poudel is the recipient of the August 26, 2010, Indian Health Service, Direct Service Tribes Advisory Committee, Certificate of Special Recognition and Appreciation for his dedicated service and significant contributions to Indian Health Services Direct Services healthcare programs and activities. He lives with his family in Gallup, New Mexico.

Delores Plunkett is the Yavapai Culture Preservation Manager for the Yavapai-Apache Nation. The program’s focus is in the revitalization of language, cultural food gathering and preparation and traditional arts/crafts.

She has coordinated the activities of the People of the Sun Gourd Singers and Bird Dancers since 2004. She previously served as the CHR Director and has participated as a member of the study’s Community Advisory Group. She provided the initial community leadership and advocacy in the community to address cancer issues and concerns. She has been a council member for five years, and is a member of the Yavapai-Apache Nation.
dplunkett@yan-tribe.org

Marilyn Pollard, has worked for the California Rural Indian Health Board, Inc. (CRIHB) for fifteen years and has held the position of the Director of Administration for many years. In this capacity Ms. Pollard has worked on a number of health care projects at the national and state level. The Medicaid Administrative Activities (MAA) Program was a ten year project that has been very successful. She received a Masters in Public Administration Degree from the University of California, San Francisco with a concentration on Health Systems Administration, and earned an undergraduate degree in Economics from Sacramento State University with a minor in business administration. Working with CRIHB has provided her a new prospective on Health Delivery systems as well as California health policy decisions and how they contribute to the improvement of health care to the Native American communities.

Ellen Provost, DO, MPH serves the statewide Alaska Tribal Health System as the Director of the Alaska Native Epidemiology Center (ANEC). She is a board-certified Preventive Medicine and Public Health physician who has served the ATHS for the past twenty years. ANEC is one of twelve tribal epidemiology centers that serve Indian Country nationwide and is located within the Community Services division of the Alaska Native Tribal Health Consortium. One of the major aims of the tribal epicenter is to monitor and report on the health of the Alaska Native population. To this end, Dr. Provost and her staff have produced various publications such as the Alaska Native Health Status Report and various regional health profiles. EMProvost@anthc.org

Alfred Quijance has volunteered with Family Wellness Warriors Initiative for years as a group leader and speaker, and currently serves as an FWWI advocate. He lived on Kodiak Island with his Aleut grandmother from infancy until the age of 12, and then moved to the secluded bay of Seldovia, Alaska, where he still lives for a portion of the year. Alfred and his wife have been married for 40 years, and they have two children and three grandchildren. aquijance@scf.cc

Denise Ramp, MSN, CNM, NP-C is the Community Outreach and Education Coordinator for the Alaska Native Tribal Health Consortium Diabetes Program. She is trained as a nurse-midwife and family nurse practitioner.
She began her work in Alaska in 2004 with the Yukon-Kuskokwim Health Corporation as a primary care provider, hospitalist, and community health aide instructor. In 2009 she started her current position with the Diabetes Program. Prior to Alaska, Ms. Ramp worked in Colorado and Virginia in various settings and was clinical faculty at several educational institutions.

Montreece McNeill Ransom, JD, MPH currently serves as a Senior Public Health Analyst with the Office of Program Development at the Centers for Disease Control and Prevention’s (CDC) National Center for Environmental Health (NCEH) and the Agency for Toxic Substances and Disease Registry (ATSDR). Montreece is currently working on The National Conversation on Public Health and Chemical Exposures, a collaborative project supported by CDC / ATSDR. Through her role in The National Conversation, Ms. Ransom contributed to the development of an Action Agenda with clear, achievable recommendations intended to help government agencies and other organizations strengthen their efforts to protect the public from harmful chemical exposures. She is a licensed member of the Georgia Bar, and a graduate of the University of Alabama-School of Law and Emory University’s Rollins School of Public Health. Ms. Ransom holds an undergraduate degree in Speech Communications from Columbus State University, Columbus Georgia, and she has published on a broad range of topics including public health emergency legal preparedness and environmental public health law.

James (Jim) C. Roberts (Hopi) from Shungopavi, Arizona and Ft. Belknap Indian Community. He has worked in American Indian governmental and health issues for over twenty-five years. Currently, Mr. Roberts serves as the Policy Analyst for the Northwest Portland Area Indian Health Board (NPAIHB), 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 from the perspectives of the tribal governments and Indian health care consumers. Jim provides technical expertise to Tribal leaders on health policy, governmental, and legislative issues. He has worked to get important legislation passed that benefits Tribes at the state and national levels. Prior to joining the NPAIHB he worked for the National Indian Health Board and with American Indian Technical Services. He completed his education at Metropolitan State College of Denver with degrees in Economics and Business Management.

Linda Rocha (Navajo) has been the Yavapai–Apache Community Wellness Manager for 4 years. She oversees the Nation’s prevention and wellness programs that provide services to approximately 1,200 members. The services include: CHRs, tobacco cessation, diabetes prevention, and WIC. She has been a member of the study’s Community Advisory Group and assisted in the initial development of the focus in cancer issues. She has previously been successful in coordinating and funding proposals to initiate provision of mobile mammography services in the community. She is an enrolled member of the Navajo Nation. lrocha@yan-tribe.org

Dr. Yvette Roubideaux, MD, MPH (Rosebud Sioux Tribe, South Dakota) is the Director of the Indian Health Service (IHS) since 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. Dr. Roubideaux 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. Yvette.roubideaux@ihs.gov

Sherry Sanchez Tibbetts, JD is the Executive Director of the American Indian Community Housing Organization (AICHO). She is a Board Member for the Minnesota Coalition for Battered Women, and serves on the Urban Indian Advisory Committee for the Minnesota Indian Affairs Council. She has provided background information on the trafficking of Native American women and children to MSNBC and the Office on Violence Against Women/Office on Victim of Crimes. In 2011, Sherry testified before the US Senate Committee on Indian Affairs on the commercial sexual exploitation of Native American women and children. She is of Comanche descent. sherry@aicho.org

Tlihtyas “Dee” Sabattus, an enrolled member of the Passamaquoddy Tribe located in Maine, graduated from Thomas College with a B.S. in Business Management/ Administration. Ms. Sabattus has 10 years experience in health administration/analysis and has worked tirelessly advocating for increased funding and health care for Indian Country. In 2008, while working for her current employer, the United South and Eastern Tribes, Inc. (USET), she was nominated and awarded the Indian Health Service Nashville Area Exceptional Performance Award for her dedication, commitment and accomplishments to Nashville Area Tribes. Ms. Sabattus currently serves as the Director of Tribal Health Program Support for USET.

Kathleen Sebelius was sworn in as the 21st Secretary of the Department of Health and Human Services (HHS) on April 28, 2009. Since taking office, Secretary Sebelius has led ambitious efforts to improve America’s health and enhance the delivery of human services to some of the nation’s most vulnerable populations, including young children, those with disabilities, and the elderly. As part of the historic Affordable Care Act, she is implementing reforms that have ended many of the insurance industry's
worst abuses and will help 34 million uninsured Americans get health coverage. She is also working with doctors, nurses, hospital leaders, employers, and patients to slow the growth in health care costs through better care and better health. Under Secretary Sebelius’s leadership, HHS is committed to innovation, from promoting public-private collaboration to bring life-saving medicines to market, to building a 21st century food safety system that prevents outbreaks before they occur, to collaborating with the Department of Education, to help states increase the quality of early childhood education programs, and give parents more information to make the best choices for their children. Secretary Sebelius served as Governor of Kansas from 2003 until her Cabinet appointment in April, 2009, and was named one of America’s Top Five Governors by Time Magazine.

Candace Shelton (Osage Nation, Gray Horse District) has a Masters Degree in Rehabilitation Counseling and is a Licensed Independent Substance Abuse Counselor (LISAC) in the State of Arizona. She is the Senior Native American Specialist for the Fetal Alcohol Spectrum Disorders (FASD) Center for Excellence. She provides training, technical assistance, workshops and conference presentations about FASD in Indian Country. Candace has been a clinical supervisor and a behavioral health director for American Indian organizations specializing in substance abuse treatment. She has been a panel member on four Treatment Improvement Protocols (TIPS) for the Substance Abuse and Mental Health Services Administration (SAMSHA), published a chapter on American Indian Alcoholism, consultant to the National Leadership Institute, Grant Reviewer for SAMSHA and a national and international presenter at conferences and workshops. She maintains a private psychotherapy practice as well as consulting in Indian Country with American Indian Tribes and organizations.

Lillian Sparks (Rosebud and Oglala Sioux Tribe) is the Commissioner of the Administration of Native Americans since March 5, 2010. She has devoted her career to supporting the educational pursuits of Native American students, protecting the rights of indigenous people, and empowering tribal communities. Prior to her appointment, Miss Sparks served as the Executive Director of the National Indian Education Association (NIEA) where she worked extensively on k-12 and early childhood education policy and appropriations impacting American Indian, Alaska Native, and Native Hawaiian students. Before joining NIEA, Miss Sparks served as a staff attorney with the National Congress of American Indians and in the legal department at the National Indian Gaming Commission at the Department of the Interior. Named one of seven young Native American Leaders by USA Today Magazine, Miss Sparks received her B.A. in Political Science from Morgan State University and her Juris Doctorate from Georgetown University Law Center in Washington, DC.

Esther Stauffer (Yup’ik) was born and raised in a small Alaska Native Village called Chefornak, Alaska. She is currently the Healthcare Program Coordinator for Cook Inlet Tribal Council, Inc. (CITC) in Anchorage, Alaska. Stauffer has been working for CITC since 2009, first as a Grant Specialist and now as a Coordinator. She has coordinated and managed different service oriented programs for over 10 years. She holds a Master’s Degree in Rural Development, a Bachelor’s Degree in Economics and is currently taking classes to complete her Ph.D. in Indigenous Studies through University of Alaska Fairbanks.

Patricia Stevenson, RN, MSN, CWS-BC, FCCWS is a goal-oriented and patient-focused RN with 27 years experience demonstrating proven strengths in acute and chronic patient care, staff development, business development, and patient advocacy. Board Certified Wound Specialist; Certified Clinical Management, Clinical Debridement, basic and advanced life support. Post-Masters Clinical Research Certificate of Mastery. Developed infrastructure for wound care training program Indian Health Service, Oklahoma City Area; established wound care as a service or direct care program for area Indian Health Service/Urban and Tribal clinics; responsible for the design and administration, planning, training program; wound clinic start up, and collaboration for program expansion.

Geoff Strommer, JD joined Hobbs Straus in 1992 and is managing partner of the Portland, Oregon, office. Geoff works with tribes on a wide range of issues, primarily self-determination and self-governance. He is dedicated to working with tribal clients to help them develop stable and strong tribal governments that deliver a range of high quality services to tribal members. Geoff is nationally recognized for his knowledge of and experience working with the Indian Self-Determination and Education Assistance Act (ISDEAA). An active participant in the ISDEAA’s developments and implementation since 1992, Geoff worked on efforts to draft and lobby for amendments to various titles of the ISDEAA. Geoff headed up the effort at Hobbs Straus to file an amicus brief on behalf of the National Indian Health Board and many tribes around the country in State of Florida, et al., v. HHS (3:10-cv-91) (N.D.Fla. Jan. 31, 2011). In 1997, Geoff was adjunct professor of law at Northwestern School of Law, Lewis & Clark College, where he co-taught a federal Indian law course. From 2000-2001, he was an instructor in the Department of Health and Human Services Executive Leadership Development Program, where he taught a negotiation-skills course.
Gstrommer@hobbsstraus.com
Andy Teuber is the Chairman and President of the Alaska Native Tribal Health Consortium in Anchorage. The Consortium serves all 138,000 Alaska Natives and American Indians residing in Alaska through their partnership in the Alaska Native Medical Center, Alaska’s only Level II Trauma Center. Andy also serves as the President and CEO of the Kodiak Area Native Association. KANA, as it’s known, provides primary care services in medical, dental and behavioral health, and provides for public safety and social services in the 7 communities of Kodiak Island. In 2010, KANA was recognized as the only site in Alaska and one of only 4 sites worldwide to meet or exceed all 21 treatment and prevention indicators under the Government Performance and Results Act. Andy serves on the Alaska Native Health Board, the Alaska Federation of Natives and the Alaska State Chamber of Commerce among others. He earned his graduate degree in business from the University of Washington, resides in Kodiak.

Donald Warne, MD, MPH (Oglala Lakota Tribe) is a Senior Policy Advisor, Great Plains Tribal Chairmen’s Association and Director, Office of Native American Health at Sanford Health. 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. Warne 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. Warne’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. Donald.Warne@SanfordHealth.org

Alice M. Warner-Mehlhorn, PhD a program officer at the W.K. Kellogg Foundation in Battle Creek, Michigan, is a member of the Food, Health & Well-being and Racial Equity teams. She participates in the development of programming, recommends proposals for funding, manages a portfolio of grants, and designs/implements grant initiatives and multi-year projects. Alice joined the Foundation in 1997 and has worked on Devolution, Leadership and Policy in Health, and Family Economic Security. She has a bachelor’s degree in psychology and master’s degrees in communication, health and hospital administration and organizational development. Dr. Warner-Mehlhorn’s doctorate is in human and organizational systems. Alice.warner@wkkf.org

Mary Willard, DDS graduated from The Ohio State University College of Dentistry in 1994 and completed a 2 year General Practice Residency at the Carolinas’ Medical Center in Charlotte, North Carolina in 1996. She is now the Dental Health Aide Therapist Training Director for the Alaska Native Tribal Health Consortium in Anchorage, Alaska. She has worked in American Indian/Alaska Native dental programs since 1996, including having experience supervising DHAT working in remote villages. mewillard@anthc.org

Wilbur Woodis, MA, (Navajo) assists the Office of Minority Health with the collaboration, coordination and management of health disparity initiatives focusing on the Native American population. He has also been project officer or active consultant on many national initiatives covering such topics as Domestic Violence, Suicide, Wellness, Head Start, Men, Gathering of Native Americans, Post Colonial Psychology, Fetal Alcohol Syndrome, Treatment Drug Courts, Community Health and currently American Indian/Alaska Native Health Disparities. Mr. Woodis has an extensive background in providing direct clinical services among this nation’s indigenous tribal people. Wilbur.woodis@hhs.gov

Wesley Yamada, Ph.D has served as the Chief of Podiatry at Hu Hu Kam Memorial Hospital, Sacaton, AZ for over 24 years. He is the director of one of the most comprehensive limb salvage programs in the IHS. Dr. Yamada graduated Magna Cum Laude from the California College of Podiatric Medicine and served as Chief Podiatry Resident at the VA Loma Linda Hospital in California. He is Board Certified in Podiatric Surgery and Podiatric Orthopedics/Primary Podiatric Medicine, and received the only Diabetic Foot Fellowship Certificate in the IHS. He has lectured nationally on the topics of diabetic foot care and wound healing and is the author of several peer reviewed articles on topic diabetic foot therapies.

Anita Yuskauskas, PhD is currently the Technical Director for Quality in Medicaid Home and Community Based Services with the Centers for Medicare and Medicaid Services. She was previously an Analyst at CMS involved with the self direction 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. Anita received her PhD in Rehabilitation from Syracuse University. She conducted numerous program evaluation and research projects specializing in organizational change, and taught undergraduate and graduate courses in human services and special education. Anita.Yuskauskas@cms.hhs.gov
3rd Floor

OPEN TO BELOW
FOYER
OPEN TO ARTWORK
ELEVATORS
KITCHEN
KITCHEN ACCESS
SECTION E
57.5 x 38'
SECTION D
57.5 x 38'
SECTION C
57.5 x 60'
SECTION F
57.5 x 60'
SECTION B
115 x 60'
TIKAHTNU BALLROOM
215 x 115'
SECTION A
115 x 57'

FAMILY

SERVICE ELEVATORS

EXHIBIT HALL CEILING
(STREET THROUGH SECOND LEVEL)

MOVABLE WALLS
CONFERENCE LOCATION

DENA’INA CIVIC & CONVENTION CENTER
600 West Seventh Avenue
Anchorage, AK 99501
Phone: 907-263-2850
Fax: 907-276-3615

The Dena’ina Civic and Convention Center, located in the heart of Anchorage, offers nearly 200,000 square feet of thoughtfully-designed, flexible event space. The largest, modern facility of its kind in the state, Dena’ina is ideal for events from national conventions and trade shows to local meetings, banquets and special occasions. Visitors to this state-of-the-art facility will enjoy meeting rooms and halls that combine breathtaking views, indoor/outdoor gathering spaces, and both traditional and modern artwork from cultures across Alaska. The Dena’ina features every technological and professional advantage you would expect in a world-class civic and convention center.

HOST HOTEL

Marriott Downtown Anchorage
820 West 7th Avenue
Anchorage, Alaska 99501 USA
Phone: 907-279-8000
Fax: 907-279-8005

Driving Directions From the Airport
Hotel direction: 8 mile(s) NW
Take W. Int’l Airport Road east, turn left (north) onto ramp, bear right (north) onto Minnesota Drive, turn right to stay on Minnesota Drive, keep right onto Minnesota Bypass, road changes name to I Street, turn right onto W 7th Avenue, Hotel is on the right side.

• This hotel does not provide shuttle service.
• Estimated taxi fare: $25.00 USD (one way)
• Full-service business center available.
• High-Speed Internet
  • Public Areas: Wireless
  • Guest Rooms: Wireless
  • Meeting Rooms: Wireless
• Parking: Valet parking: $24 USD daily
  Off-site parking: $1 USD daily, $24 USD daily
  $24 overnight, $16 daypark

OVERFLOW HOTEL

Westmark Anchorage Hotel
720 West 5th Avenue
Anchorage, Alaska 99501-2198
Phone: 907-276-7676
Fax: 907-276-3615

CONFERENCE INFORMATION

Agenda Changes
Changes to the conference agenda will be posted daily by the registration desk located in the Dena’ina Civic & Convention Center third floor foyer.

Conference Badges
Official National Indian Health Board 28th 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 Dena’ina Civic & Convention Center third floor foyer.

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

Registration Desk
The registration desk will be open throughout the conference to meet your conference and informational needs. The registration desk is located in the Dena’ina Civic & Convention Center third floor foyer.

The registration desk hours are:
• Monday, September 26, 2011 - 12:00 pm to 5:00 pm
• Tuesday, September 27, 2011 - 7:00 am to 5:00 pm
• Wednesday, September 28, 2011 - 7:00 am to 5:00 pm
• Thursday, September 29, 2011 - 7:00 am to 1:00 pm

Code of Conduct
The National Indian Health Board is dedicated to providing a positive and healthy environment for our conference attendees. The National Indian Health Board Annual Consumer Conference maintains a policy of being Drug and Alcohol Free during all conference related events, meetings, plenary sessions and workshops. The Board of Directors of the National Indian Health Board and staff respectfully request that all participants, exhibitors, guests, friends and family members please conduct themselves in a respectful, courteous and appropriate manner at all times to make the conference experience enjoyable for everyone.
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- Get answers to your questions at breakout sessions.
- Check out the Outreach and Education Materials at the CMS Booth.
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October 9-11, 2012
National Indian Health Board
29TH ANNUAL
Consumer Conference &
40th Anniversary Celebration
Denver, Colorado

Thank You
National Indian Health Board

For helping to make the
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28th Annual Consumer Conference
A Success!