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NIHB UPDATES

Let's Go to Alaska! Just 10 Days Left to Register for NIHB's 28th Annual Consumer Conference

The National Indian Health Board (NIHB) invites tribal leaders, health administrators, policy makers, and area health boards to the 28th Annual Consumer Conference (ACC) in Anchorage, Alaska at the Dena'ina Civic and Convention Center from September 26 to 29, 2011. The theme for this year's conference, *Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health!*, will provide a chance for attendees to discuss successes, challenges, opportunities, and the future of health care for American Indian and Alaska Native people.

We are very happy to have many noted speakers at the NIHB 28th Annual Consumer Conference, but especially excited to highlight two American Indian/Alaska Native healthy heroes...John Baker, 2011 Iditarod Sled Dog

Champion, and Callan Chythlook-Sifsof, 2010 Winter Olympian Snowboarder!

[VIEW THE LATEST 2011 ACC AGENDA](#)

Just confirmed: The Health Resources and Services Administration (HRSA) will be conducting a Kick-Off Tribal Consultation Session on Monday, September 26, 2011 from 1:30 - 4:30 pm. This face-to-face session is an opportunity for Tribal Leaders to provide input on HRSA's revised consultation policy.

You can register and learn more about the conference details [here](#). Online registration will continue through September 25th and on-site registration will also be available.

For more details, visit the [ACC's website](#) or contact NIHB Deputy Director, [Evangelyn "Angel" Dotomain](#)

HILL UPDATES

Protect Indian Health from Rescissions! House Appropriations Introduces Short-term Continuing Resolution

On Wednesday, September 14th, the House Committee on Appropriations introduced a short-term Continuing Resolution (CR) that will keep the Federal government operating through November 18th. With the end of the fiscal year approaching on September 30th and work on individual appropriations bills going slowly, Congress must pass a CR in order to avoid a government shutdown. H. J. Res. 79 is a relatively "clean" piece of legislation, free of controversial policy riders or surprise



amendments. It funds government operations through mid-November at a rate of \$1.043 trillion.

This figure is reflective of levels agreed to in the debt-ceiling deal and represents a 1.5% cut across-the-board to discretionary spending, including funding for the Indian Health Service (IHS). **NIHB is encouraging Tribes to reach out to their Members of Congress and demand that Indian Health be spared from this rescission. To call your Members of Congress, please contact the Congressional switchboard at: (202) 224-3121.**

Some parts of defense and national security spending are exempt from cuts. The bill also contains \$3.95 billion in disaster relief funding for those states impacted by recent hurricanes, floods, and other disasters. In addition, attached to the legislation is H.J. Res. 66, a bill that approves the renewal of certain import restrictions contained in the Burmese Freedom and Democracy Act of 2003. This bi-partisan legislation simply continues existing law, and was previously passed by the House on a voice vote earlier this year.

The House is scheduled to vote on H. J. Res. 79 late next week.

Congressional Budget Office Director Warns Supercommittee that Cuts could Further Slow Recovery

At the latest public hearing of the Joint Select Committee on Deficit Reduction (or Supercommittee), the Director of the non-partisan Congressional Budget Office (CBO), Doug Elmendorf warned Committee Members, who are tasked with reducing the deficit by \$1.5 trillion over the next ten years, that deep cuts to spending that took effect immediately could have a negative effect on the nation's sputtering economic recovery. He suggested that the Committee should opt for a different approach saying, "If policymakers wanted to achieve both a short-term economic boost and medium- and long-term

fiscal sustainability, [the] most effective [policy would be] changes in taxes and spending that would widen the deficit now but narrow it later in the decade." He also noted that for businesses and the markets to have full confidence in the nation's future fiscal restraint, changes such as these would have to be, "sufficiently specific and widely supported." The next public Supercommittee hearing will take place on Thursday, September 22nd at 10 am and feature testimony from Thomas Barthold, the chief of staff for the Joint Committee on Taxation.

HEALTH REFORM UPDATES

HHS Hosts Last Tribal Consultation on Affordable Care Act Health Insurance Exchanges Proposed Rule

The Department of Health and Human Services (HHS) concluded a series of Tribal consultations on the Affordable Insurance Exchanges Notice of Proposed Rulemaking (NPRM) as well as other provisions in the Affordable Care Act (ACA) in Washington, DC on September 15th. During this third Tribal consultation sessions, Tribal Leaders expressed a variety of concerns, including:

- The simplification of HHS' messaging to individual Tribal members on the ACA.
- The Definition of Indian throughout the statutory language ACA.
- The Tribally-request released of a summary of HHS consultations.

HHS Secretary Sends Letters on Consultation to Governors, Update on ACA

On September 9th, the Secretary of the Department of Health and Human Services (HHS) Kathleen Sebelius sent out a "Dear Tribal Leader" letter giving Tribes a 3rd Quarter Report on the status of implementation of the Affordable Care Act (ACA) and the Indian Health Care



Improvement Act (IHCA). The letter and report are attached.

Then, on September 14th, the Secretary sent a letter addressed to all governors encouraging meaningful consultation between states and Tribes as provisions of ACA are implemented at the state level. This letter comes in response to Tribal requests for assistance in improving state-Tribal relations via various agencies within HHS. This letter is also attached.

HHS Awards ACA Funds to Beacon Communities for Health IT

On September 12th, the Department of Health and Human Services (HHS) through the Health Resources and Services Administration (HRSA) awarded \$8.5 million in Affordable Care Act (ACA) funds to 85 community health center programs in 15 Beacon Communities nationally. These funds help support health centers with the adoption of health information technology (HIT) to support long-term improvements in quality of care, health outcomes and cost efficiencies.

Beacon Communities, including some in Tribal communities, receive funds through the Office of the National Coordinator for Health Information Technology (ONC) to build and strengthen their HIT infrastructure and exchange capabilities to improve care coordination, increase the quality of care, and slow the growth of health care spending. They are communities who have already made inroads in the development of secure, private, and accurate systems of electronic health record (EHR) adoption and health information exchange. The awards from HRSA are intended to enable existing health centers located in Beacon Communities to participate in community-wide health care improvement initiatives that include a strong information technology component. Recipients include health centers in cities across the country, from Cincinnati, Ohio and Detroit, Mich. to Spokane, Wash. and San Diego, Calif.

A list of health center Beacon community supplemental funding grantees by organization and state is available at www.hrsa.gov/about/news/2011tables/beconawards.html.

Sign Up for Washington Report, at:
http://www.nihb.org/legislative/washington_report.php

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NEXT WEEK IN WASHINGTON

HOUSE WAYS AND MEANS COMMITTEE HEARING ON, " EXPIRING MEDICARE PROVIDER PAYMENT POLICIES"

DATE: SEPTEMBER 21ST

TIME: 2:00 PM

LOCATION: 1100 LONGWORTH HOUSE OFFICE BUILDING

SENATE COMMITTEE ON INDIAN AFFAIRS OVERSIGHT HEARING ON, "TRIBAL LAW AND ORDER ACT ONE YEAR LATER: HAVE WE IMPROVED PUBLIC SAFETY AND JUSTICE THROUGHOUT INDIAN COUNTRY?"

DATE: SEPTEMBER 22ND

TIME: 2:15 PM

LOCATION: 628 DIRKSEN SENATE OFFICE BUILDING

CMS ALL TRIBES' CALL

DATE: SEPTEMBER 23, 2011

TIME: 1:00 - 2:00 PM EST

CALL IN NUMBER: 1-866-288-9872

PASSCODE: 165709

THE CMS WILL HOST AN ALL TRIBES' CALL TO PROVIDE INFORMATION ON MEDICARE PROVIDER ENROLLMENT APPLICATION FEE PROVISIONS UNDER THE AFFORDABLE CARE ACT (ACA).

