

Tribal Technical Advisory Group

To the Centers for Medicare & Medicaid Services

c/o National Indian Health Board 926 Pennsylvania Avenue, SE Washington, DC 20003 (202) 507-4070 (202) 507-4071 fax

March 10, 2010

TTAG Conference Call - Action Items

Action Item	Timeline	Person Responsible	Status	Notes
Coordinate a presentation concerning PECOS at a future TTAG meeting.	ASAP	Mr. Goodacre	Ongoing	
Develop comments on the meaningful use regulations and submit to CMS.	March 15	TTAG	Ongoing	
Distribute copies of the CMS Acting Administrator's testimony at the HHS Budget Consultation Session.	ASAP	Mr. Goodacre	Ongoing	
Report on the availability of IHS PECOS comments.	ASAP	Mr. Harper	Ongoing	
Report on NIHB budget issues at the April TTAG face-to-face meeting.	April 29-30	NIHB	Ongoing	
Submit comments on the Insure Kids Now materials developed for posting on the website.	March 26	TTAG	Ongoing	
Report on the GAO visit to the Alaska Native Tribal Health Consortium Dental Health Aid Therapy Training Program.	ASAP	Ms. Davidson	Ongoing	
Review the supplemental outreach materials and provide comments to CMS.	March 26	TTAG	Ongoing	
Review and submit comments concerning the LTC inventory developed by NIHB.	ASAP	TTAG Members	Ongoing	
Provide comments on the SPA review process.	ASAP	TTAG	Ongoing	

March 10, 2010

TTAG Conference Call Minutes

Agenda Item	Discussion	Action
Documents Received	<ul style="list-style-type: none"> • Agenda (Attachment A) • Developing AI/AN Messaging (Attachment B) • Working with Partners to Reach AI/AN Communities (Attachment C) • Children's Health Insurance Backgrounder (Attachment D) • Many Families, Their Kids are Eligible for Free or Low-Cost Health Insurance Coverage and Don't Know It (Attachment E) • Draft Agenda for April 2010 TTAG Face-to-Face Meeting (Attachment F) 	

<p>Welcome and Call to Order</p>	<p>Ms. Valerie Davidson, Chair, Tribal Technical Advisory Group (TTAG) and Executive Vice President and Senior Director, Legal and Intergovernmental Affairs, Alaska Native Tribal Health Consortium, welcomed participants and asked that the roll be taken.</p>	
<p>Roll Call</p>	<p>Ms. Tyra Baer, CMS Project Assistant, National Indian Health Board (NIHB), took the roll of the TTAG members participating in the call:</p> <p>TTAG: Alaska – Valerie Davidson, Aberdeen – absent Albuquerque – Carolyn Finster Bemidji – Phil Norrgard Billings – absent California – absent Nashville – absent Navajo – Anselm Roanhoarse Oklahoma – absent Phoenix – David Reede Portland – absent Tucson – absent TSGAC – Mickey Peercy, NIHB – Sally Smith NCAI – absent IHS – Carl Harper, NCUIH – Carmelita Skeeter</p> <p>Tribes and Tribal Organizations: Myra Munson Kris Locke Carol Barbero Randella Bluenose Sonicray Bonnell Danielle Delaney Tracy Jones Rhonda Farrimond Gerald Moses Alida Montiel</p> <p>CMS: Kay Branch Lindsey Cometa Jackie Garner Rodger Goodacre Ginni Hain Robert Inzer John Johns Keith Lynch Julie Rand Nancy Rios Laine Terwilliger Diane Thornton Barbara Williamson</p> <p>IHS: Elmer Brewster Balerma Burgess Tammy Clay Chris Manydeeds</p>	

	<p>NIHB: Tyra Baer Robin Carufel</p> <p>At the time of the roll call, a quorum was not present. Additional TTAG members dialed in during the course of the call increasing attendance to the level of a quorum. As a result, most of the call was considered a working session instead of an official meeting of the TTAG.</p> <p>Ms. Davidson called the meeting to order.</p>	
<p>Report from Chair</p>	<p>Ms. Davidson thanked all of the TTAG members for their support during the recent Department of Health and Human Services consultation, especially Mr. W. Ron Allen, TTAG Vice-Chair representing the Jamestown S’Klallam Tribe; Mr. James Roberts, Policy Analyst, Northwest Portland Area Indian Health Board; and Ms. H. Sally Smith, Alaska Area Representative, NIHB and Chairman, Bristol Bay Area Health Corporation.</p>	
<p>Report from Secretary</p>	<p>Ms. Carolyn Finster, TTAG Secretary and Director, Pine Hill Health Center, presented the notes from January 13 conference call for approval by the TTAG membership. NIHB circulated the draft notes to TTAG members for review and comment. Ms. Finster reported that members had reviewed and commented on the notes. Ms. Baer confirmed that NIHB distributed the revised minutes, which reflect member comments, to the TTAG membership. Ms. Kris Locke, TTAG Technical Advisor, pointed out that there were some errors related to the categorization of participants. Ms. Baer agreed to work with the contractor to resolve these issues.</p> <p>Approval of the minutes was initially postponed until the next call due to lack of a quorum. Once enough members joined the call, the minutes were approved by unanimous consent.</p>	
<p>PECOS Network Critical Issue</p>	<p>Because Ms. Kitty Marx, Director, Tribal Affairs Group (TAG), Office of External Affairs (OEA), Centers for Medicare & Medicaid Services (CMS), was unable to participate during the first part of the call, the agenda was modified to accommodate her schedule, with the report from CMS moved to a later portion of the call.</p> <p>Ms. Davidson explained that providers can enroll in Medicare via an online process (Provider Enrollment, Chain, and Ownership System [PECOS]). Under the current rules, Indian Health Service (IHS) providers cannot use this process and must submit applications on paper forms, which creates problems. She expressed her hope that CMS could provide assistance with this matter. TTAG forwarded an email from Mr. Jim Lamb, Alaska Area Alternate and Director, Patient Financial Services, Alaska Native Medical Health Consortium, outlining these issues to Ms. Marx.</p> <p>Mr. Rodger Goodacre, TAG, OEA, CMS, explained that PECOS is a national system that CMS uses to keep track of all providers, including institutional providers, individual practitioners, non-practitioners, etc. PECOS went online about one year ago. He surmised that the agency bumped into a system problem. TAG has</p>	<p>Mr. Goodacre will coordinate the participation of a CMS staff member in a future TTAG meeting to discuss issues related to PECOS.</p>

	<p>alerted the provider enrollment unit in CMS about the issue. Their preliminary response related to structural issues within the system (The system is organized by states; IHS providers are nationwide.). He promised to secure a provider enrollment staff member to address these issues during a future meeting.</p>	
<p>Meaningful Use Comments</p>	<p>Ms. Davidson reminded participants that comments concerning the meaningful use of electronic health records (EHRs) are due to CMS on Monday, March 15.</p> <p>She anticipated that the way information is captured concerning the “place” of providers would affect incentive payments for IHS facilities.</p> <p>Mr. Elmer Brewster, Health Science Administrator, IHS, explained that the way the rule is written makes providers who provide services out of provider-based clinics and use hospital-based location codes (i.e., 21, 22, and 23) ineligible for individual provider incentives as they are counted under the hospital in the same way providers who are actually employed by hospitals (e.g., pathologists) are counted. This will affect providers such as primary care doctors and nurse practitioners working in provider-based clinics. He suggested that CMS consider an exemption for these providers, federally qualified health centers, and rural health centers. An alternative approach would be the inclusion of an add-on to the hospital incentive payment for providers working in those types of clinics. Mr. Brewster indicated that there are no plans to change the overall payment structure. He did not know if there are any analogous situations within university hospitals. IHS will submit comments on this issue to CMS.</p> <p>Ms. Davidson asked when IHS’ comments would be available. She was concerned that many in Indian Country do not understand the implications of the rule. Specifically, she wanted to know how interested parties could review the IHS comments so that they could indicate their endorsement of them to CMS. Mr. Brewster replied that the comments have not yet been developed and did not know if or when they would be available. Mr. Carl Harper, Director, Office of Resource Access and Partnerships, IHS, promised to look in the matter and determine whether the IHS comments could be released.</p> <p>Mr. Robin Carufel, Consultant, NIHB, asked how the decision to use either a Resource and Patient Management System or a private EHR would affect tribes’ 638 plans. Mr. Brewster indicated that he thought providers would have to assign payments to the tribe or clinic. Tribes also need to be certain that their EHR vendors are certified.</p> <p>Ms. Davidson noted the opportunity presented by EHRs and the meaningful use rules. She pointed out that tribes do not have the infrastructure for understanding the nuances of the implication of the technical rules and opportunities for their individual programs. She acknowledge CMS’ and the Office of the National Coordinator’s desire for tribes and tribal providers to fully access services just like other providers and health care organizations. She asked if the TTAG wanted to provide comments on meaningful use or if participants preferred to provide their own comments.</p>	<p>Mr. Harper will report on the availability of IHS PECOS comments.</p>

	<p>Ms. Tracy Jones, Director, Business Office, Chickasaw Nation Health System, indicated that her group has been working on comments and volunteered to pull together comments from the TTAG members. Other volunteers included Mr. Carufel, Mr. Lamb, and Ms. Alida Montiel, Health Systems Analyst, Inter Tribal Council of Arizona.</p> <p>Ms. Montiel asked if the current rule covers the wide range of providers participating in her organization’s system. She also asked if there was an opportunity to expand the types of providers covered.</p> <p>Mr. Brewster offered to share a link to a listserv on meaningful use issues with the TTAG.</p>	<p>TTAG will draft comments on the meaningful use regulations and submit them to CMS by March 15.</p>
<p>Report from CMS</p>	<p><u>HITECH Update</u> Mr. Goodacre reminded participants that there would be a Health Information Technology for Economic and Clinical Health (HITECH) roundtable following the conclusion of the TTAG face-to-face meeting on April 30. The session will provide an opportunity for participants to learn more about related issues and have their questions answered.</p> <p><u>HHS Budget Consultation Review</u> Mr. Goodacre reported that Mr. Roberts led the CMS session and did an excellent job of communicating tribal concerns over budget activities to the agency.</p> <p>The general session focused on broader budget difficulties faced by tribes in the context of state cuts to services. Ms. Charlene Frizzera, Acting Administrator and Chief Operating Officer, CMS, indicated that CMS would be willing to provide technical assistance with regard to American Recovery and Reinvestment Act provisions that provide relief to states and to structuring Indian benefit packages to place services outside the reach of state Medicaid cuts.</p> <p><u>FY 2010 Budget</u> Mr. Goodacre also reported that CMS fully funded the TTAG Strategic Plan activities for 2010 and the near future. CMS was able to fund \$2.4 million for the five principal activities, which is greater than the estimated \$2.1 million needed to meet Strategic Plan goals. He promised to distribute copies of the Acting Administrator’s testimony at the consultation, which details the allocation of the funds across the activities. CMS anticipates that the 2011 funding will at least remain stable and could increase by as much as 10 percent, which would fully fund Strategic Plan activities. CMS requested that the TTAG realign its activities to coincide with the federal fiscal year. Mr. Goodacre anticipated that Mr. Roberts and Mr. Allen would meet with the CMS Budget Director in April to discuss the 2011 funds and ensure that TTAG can make the best use of those funds.</p> <p>Ms. Davidson thanked Mr. Goodacre for his report and asked Ms. Baer to add an NIHB budget report to the next TTAG face-to-face meeting.</p> <p><u>Insure Kids Now – Identification of IHS and Tribal Dental Providers</u> Ms. Marx noted that CMS is updating the Insure Kids Now site</p>	<p>Mr. Goodacre will provide copies of the CMS Acting Administrator’s testimony at the HHS Budget Consultation Session to TTAG members.</p> <p>NIHB will report on budget issues at the April TTAG face-to-face meeting.</p> <p>TTAG members will submit</p>

	<p>(www.insurekidsnow.gov), which includes links to IHS and tribal sites. She asked if participants were aware of any problems with the way these are currently listed on the site. Ms. Lindsey Cometa, TAG, OEA, CMS, noted that the documents that were provided to the TTAG members prior to the call (Attachments B-E) were things that the contractor was working on but had not yet posted on the webpage. The TTAG members agreed to delay discussion about the website until they had the opportunity to review the site. CMS requested that TTAG comments be received by March 26.</p> <p>Ms. Davidson informed participants that the General Accountability Office (GAO) is coming to visit the Alaska Native Tribal Health Consortium Dental Health Aid Therapy Training Program as part of its survey of enhanced dental services for children. She promised to report back to the TTAG after the visit.</p> <p>Ms. Finster noted that the New Mexico Primary Care Association is conducting a survey on extending dental provider levels, including dental therapists as in the Alaska model.</p>	<p>comments on the materials developed for posting on the Insure Kida Now website by March 26.</p> <p>Ms. Davidson will report on the GAO visit to the Alaska Native Tribal Health Consortium Dental Health Aid Therapy Training Program.</p>
<p>Subcommittee Reports: Outreach and Education</p>	<p>Mr. Goodacre reported that IHS signed the interagency agreement, which includes \$450,000 for training. There will be 21 training sessions this year. Planning for the training has begun. Only a few sessions have been tentatively scheduled. The Native American Contacts (NACs) are working with IHS and tribal representatives to develop the training and schedules. Mr. Goodacre hoped that a schedule would be available by the face-to-face meeting in April.</p> <p>Ms. Cometa informed participants that the national Child Health Insurance Program Reauthorization Act of 2009 (CHIPRA) outreach campaign is underway. Additionally, the CHIPRA Cycle 1 grantees are conducting their outreach and enrollment activities. Awards will be made soon to the grantees responsible for conducting outreach to Indian children.</p> <p>CMS is interested in developing supplemental materials to support the outreach campaigns. The agency worked with the Subcommittee and Ketchum to develop a list of effective supplemental materials for American Indian/Alaska Natives. The final list included nine items (e.g., public announcement scripts, postcard/appointment reminders, and media education piece), some of which have already been reviewed and commented upon. The materials in this online toolkit are free from copyright restriction. She asked the TTAG members to review the additional documents circulated prior to the meeting and provide comments by March 26. The goal is to have Ketchum post these materials on the Insure Kids Now website. Ms. Cometa promised to determine whether there is a link to IHS in the Insure Kids Now website.</p> <p>Ms. Carol Barbero, TTAG Technical Advisor, noted that the documents provided to the members included redlining (she agreed with the changes). She asked if they had already been approved and asked who had produced them. Ms. Cometa replied that the comments were from the Subcommittee. She stressed the importance of receiving comments in a timely manner so that comments can be incorporated, posted to the website, and available</p>	<p>TTAG members will review the supplemental outreach materials and provide comments to CMS by March 26.</p>

	to the CHIPRA grantees. She asked that members send their comments to Mr. Goodacre , who will coordinate a final review by the Subcommittee.	
Subcommittee Reports: Data	No report.	
Subcommittee Reports: Long-Term Care	<p>Mr. David Reede, Vice Chairman, San Carlos Apache, reported that NIHB would send the Long-Term Care (LTC) Inventory to TTAG members for review and comment. TTAG members should also look for a copy of the abstract and questionnaire in their inboxes.</p> <p>Mr. Reede reminded participants that there will be a LTC conference in Phoenix on May 4-6.</p> <p>The Subcommittee plans to hold another conference call during the first week in April.</p>	TTAG members will review and submit comments concerning the LTC inventory developed by NIHB.
Subcommittee Reports: Medicaid Administrative Match	No report.	
Subcommittee Reports: Across State Borders	Mr. Anselm Roanhorse , Executive Director, Navajo Nation Division of Health, reported that the Subcommittee met on March 8 and discussed the 26-page draft report submitted by Kauffman and Associates, Inc. (KAI). The report did a good job of capturing the difficulties providers are experiencing. The Subcommittee provided feedback on the report. He anticipated that KAI would incorporate the Subcommittee's comments into the report, finalize it, and submit it to CMS on March 12.	
Subcommittee Reports: ARRA Protections Workgroup	<p>Ms. Marx reported that the Subcommittee met on March 4 and discussed the pre-print for the State Plan Amendments (SPAs), which is the template that states will have to submit to show that they have met the tribal consultation requirements. As a result of the discussion, CMS deleted the checklist states were required to use to show they had consulted with tribes and replaced it with a narrative describing the state's tribal consultation policy, the process used to develop the policy, and how it occurred.</p> <p>With regard to Section 5006, CMS is changing the SPA requirements to address the tribal consultation process. She thought that the changes need to be processed for internal clearance and then published in the <i>Federal Register</i>. CMS will work on official guidance for state/tribal consultation processes and will seek assistance from the Subcommittee as that effort moves forward.</p> <p>Ms. Montiel asked if CMS would request copies of states' consultation policies in addition to the information contained in the narrative. Ms. Marx stated that the Regional Offices review all of the information submitted with the SPAs, ask additional questions as needed, and keep all of the information on file. Additionally, CMS is working with the NACs to obtain copies of each of the states' consultation policies to have as a resource for tribes. She added that Ms. Cyndi Gillaspie, CMS, offered to explain the SPA process at the</p>	TTAG members will provide comments on the SPA review process, with an emphasis on tribal consultation processes, to CMS.

	<p>April face-to-face meeting to help members determine what aspects of the SPAs require consultation. CMS would like to have input from the TTAG on this issue.</p> <p>Ms. Lane Terwilliger, Center for Medicaid and State Operations, CMS, added that CMS is considering developing a SPA Process 101 course. CMS processes more than 1,000 SPAs each year. The agency would like to have input from the TTAG on ways to make the task of processing SPA work better for all involved parties.</p> <p>Ms. Davidson thanked the workgroup members for all of their input.</p>	
Subcommittee Reports: CMS Day	<p>Mr. Robert Inzer, CMS, pointed out that the Subcommittee had not yet been formed and invited call participants to join in the planning process. CMS funds one day at the end of the NIHB consumer conference. The day includes presentations, listening sessions, and opportunities for participants to learn about CMS programs.</p> <p>Individuals volunteering were Ms. Carmelita Skeeter, Executive Director, Indian Health Care Resources Center of Tulsa; Mr. Mickey Peercy, Oklahoma Area; Ms. Randella Bluenose, Executive Director, Nation Indian Council on Aging; and Ms. Danielle Delaney, National Council of Urban Indian Health.</p> <p>Ms. Davidson thanked all of the TTAG members who volunteered to serve on subcommittees.</p>	
Other Business	<p>Ms. Davidson reminded participants that the Medicare and Medicaid Policy Committee meeting will take place on Wednesday, April 28. The TTAG face-to-face meeting will be held April 29 (all day) and April 30 (morning only). A HITECH roundtable will take place in the afternoon on April 30.</p> <p>Because the TTAG does not traditionally schedule a conference call in the same month in which it has a face-to-face meeting, the TTAG members elected to have no call in April. The next TTAG conference call will take place on May 12.</p>	
Adjourn	<p>With no other business to be discussed, the call adjourned.</p>	

DRAFT

Attachment A:

Agenda

Tribal Technical Advisory Group

To the Centers for Medicare & Medicaid Services

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TTAG AGENDA

Conference Call

Wednesday, March 10, 2010 2:30 – 4:00 PM (EST)

Call in Number: 1-877-267-1577 Participant Code: 322943#

- 2:30 Welcome** – Valerie Davidson, Chair
Roll Call - Tyra Baer, NIHB
- 2:35 Report from Chair** –Valerie Davidson
- 2:40 Report from Secretary** - Carolyn Finster
- a. Approval of 01/13/2010TTAG Conf Call notes
- 2:45 Report from CMS** - Kitty Marx, Director TAG
- a. **Updated Implementation Plans** to address Tribal Priorities
 - b. **HHS Budget Consultation Review**
 - c. **HITECH update**- Capt. Jim Lyon
 - d. **FY 2010 Budget**- Rodger Goodacre
 - e. **TTAG/NASMD workgroup**
 - f. **InsureKids - Identification of IHS and Tribal Dental Providers** - Nancy Goetschius
- 3:05 Discussion Topics**
- 3:30 Subcommittee activities/schedules**
- a. **Outreach and Education** - Kathy Hughes
Review of AI/AN CHIP Toolkit Materials (see attachments)
 - b. **Data** - Jim Crouch
 - c. **LTC** - Robert Moore
 - d. **MAM** - Jim Roberts
 - e. **Across State Borders** - Anslem Roanhorse
 - f. **CMS/TTAG ARRA Protections Workgroup**- Kitty Marx/Cyndi Gillaspie
 - g. **CMS Day Subcommittee**- Bob Inzer
- 3:40 Other Business**
- a. **April 29-30, 2010 Face to Face Agenda** (revise Feb 18-19 agenda as necessary) see attachment
- 4:00 Adjourn**

NOTE: Future Face to Face Meetings and Conference Calls

April, 2010 (At Holiday Inn Capitol): April 29-30, 2010

NOTE: April 30, 2010: TTAG 9am-12pm and HITECH Roundtable 1pm – 5pm

July, 2010(At NMAI): July 28th & July 29th

Nov, 2010 (At NMAI): Nov. 9th full day and Nov.10th full day

NOTE: NASMD Conference November 7-10, 2010

Remaining 2010 TTAG Conference calls: April 14, May 12, June 9, July 14, August 11, September 8, October 13, December 10.