



Native American Technical Advisory Committee (NATAC)

Minutes for October 1, 2021

Time: Start 2:00pm **End:** 4:05 pm **Place:** Virtual meeting

Chair: Shelly Begay, Human Services Department (HSD) Tribal Liaison

Committee Members/Call In: Nicole Comeaux, Medical Assistance Division (MAD) Director; Megan Pfeffer, MAD Deputy Director; Lorelei Kellogg, MAD Deputy Director; Theresa Belanger, MAD NA Liaison; Karmela Martinez, ISD Director; Dr. Neal Bowen, BHSD Director; Camille Vigil, MAD; Tracy Sanchez, Henrietta Lewis, Albuquerque Area IHS; Eldred Lesensee, Indian Affairs Department; Rick Vigil, Tesuque Pueblo; Jean Pino, Zia Pueblo; Emily Haozous, Ft. Sill Apache; Ezra Bayles, Taos Pueblo; Craig Sandoval, Iris Reano, Anthony Yepa, Kewa Pueblo; Amber Carrillo, All Pueblo Council of Governors; Monica Vigil, Nambe Pueblo; Mary Scott, Laguna Pueblo; Joseph Herrera, Governor Cochiti Pueblo; Lonna Valdez, Jicarilla Apache; Valerie Namoki James, San Felipe Pueblo; Ed Ackron, Santa Ana Pueblo

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
I. Invocation/Introductions	Former Governor Rick Vigil from Tesuque Pueblo gave the invocation. Introductions were done.	Completed	All	Completed
II. Review/approval of October 26, 2020 and March 22, 2021 minutes	Minutes for the October May 24th meeting were reviewed, edit, and approved by motion from Jean Pino (Pueblo of Zia) and 2 nd approval from Ed Ackron (Santa Ana Pueblo)	Completed	All	Completed
III. CYFD Presentation Kevin S. Settlement Update	<p>Cynthia Aragon provided overview of CYFD and Kevin S: The state has a fundamental philosophical approach of transparency, collaboration, accountability, and positivity. CYFD and HSD are co-creating a system to ensure safety, permanency and well-being for all children in State custody.</p> <p>CYFD and HSD will implement legislation, rules and policy and a revamp in the system</p> <p>Reviewed four Kevin S. Settlement Commitments</p> <ul style="list-style-type: none"> • Appendix A Creating a Trauma Informed System of Care • Appendix B Developing more appropriate placement options, reducing congregate care, increasing kinship and guardianships • Appendix C relates to the Indian Child Welfare Act. 		<p>Cynthia Aragon (Dine') Assistance General Counsel, CYFD</p> <p>Shelly Begay HSD-Office of the Secretary Tribal Liaison</p>	

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	<ul style="list-style-type: none"> • Appendix D Expanding Access to Behavioral Health Services and Building the Workforce <p>Appendix C</p> <p>State ICWA law to be introduced in Legislative session 2022 as it did not pass legislation in 2021</p> <p>Reviewed Target and Target Outcomes to address promotion of tradition interventions</p> <p>2.1 Target Promote traditional interventions as first line interventions & Service</p> <ul style="list-style-type: none"> • Create and using a cultural assessment tool • Expand BH network • Reinstate the BH Tribal Liaison position within BHSD/HSD <p>3.1 Target HSD and CYFD will pursue federal funding to maximize extent allowable through Medicaid and IV-E for traditional & culturally responsive treatments, interventions & Supports</p> <ul style="list-style-type: none"> • CYFD-Joint Powers Agreement for pass through IV-E funding • Extend The Payment Assistance to include children in <i>Tribal</i> custody • Exploring options of 1115 Waiver upon CMS traditional healing reimbursement approval • Promotion of MCO Traditional Healing and VAS • Engage MCO's for Compressive delivery of services in BH, PH, LTC • Using culturally and relevant services • Contracting for Care Coordination for CISC for Fee for Service members <p>5.1 Implementation Target</p> <ul style="list-style-type: none"> • CYFD working with contractor to complete surveys and develop a plan to recruit and retain more Native Resource Families • Increase more outreach and education 			

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	<p>7..1 Implementation Target c.7.1</p> <ul style="list-style-type: none"> • CYFD and HSD will collect and analyze data sufficient to understand the characteristics and needs of Native children <p>2.1 Target Outcome- Identify, develop and Expanding Access</p> <ul style="list-style-type: none"> • Expanding and identifying access to service • We are not developing cultural relative services or treatments • Cultural Assessment Questionnaire (CYFD) • Program guides and training of staff (CYFD) • HSD meeting with stakeholders to discuss expanding services • Collaborating with CYFD to hold joint collaboration meetings • Engage with tribes to identify specific needs and allocate resources and funding • Increase BH enrollment expansion <p>Target Outcome 2.3 CYFD will develop & Comply with policies to ensure Native children receive traditional and culturally responsive services, supports or interventions</p> <ul style="list-style-type: none"> • NMAC cultural intervention as active effort • Creating Internal Instruction Program Guide and training with staff. <p>Target Outcome 3.1</p> <ul style="list-style-type: none"> • CYFD will develop and comply with policy to provisions of direct assistance for traditional ceremonies • NMAC Cultural intervention as active effort <p>Progress to Date review</p> <ul style="list-style-type: none"> • New Office of Tribal Affairs • ICWA out of preferred placement reviewed 30 days • Tribal Participation in Relative Connections-Kinship Navigator Programs • Collaborating with NICWA to develop system-wide ICWA training program <p>Next Step:</p>			

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	<ul style="list-style-type: none"> • Extensive outreach and engagement working with tribal ICWA workers, resource families and tribal leadership • Work with tribes to identify and financial support and tech assistance • Develop procedural plans for cultural relevant services • Develop NMAC policy on cultural interventions • Improve data collection <p>Questions Ezra Bayles-Taos Pueblo IV funds and eligibility-we have a lot of questions how tribal parents are eligible for funds vs. non-tribal parents. Where can we find the eligibility requirements mentioned on slide 12</p>	Cindy Aragon will be setting up a meeting Taos and CYFD's Federal Reporting Bureau		
IV. Behavioral Health Services (BHSD) update	<p>988 Implementation Update by Dr. Neal Bowen</p> <ul style="list-style-type: none"> • Submitted Preliminary Plan to Vibrant which is a national planning grant to start the work • Supports ongoing planning of mobile crisis response • Working groups are still meeting. Native American Tribal Workgroup has been formed • Completed an in-person submit on 988 training held at Isleta Pueblo. • More training in early 2022 for Go-Live on July 16, 2022 • Mobile Crisis and A Safe Place to go will not be available in July 2022 but working on models • NM was awarded a mobile crisis grants from CMS and SAMHSA and grant was written to work specifically with tribes. 	None	Dr. Neal Bowen, Behavioral Health Services Division	Update at next NATAC meeting

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	<ul style="list-style-type: none"> • Medicaid Maintenance of Effort (MOE) transition will happen over three months beginning 01/01/2022 • ISD Case Management efforts will continue with processing applications, renewals the same way prior to PHE. • Processing changes in circumstance and processing 12 month certifications when possible • Under MOE MAD is not terminating any Medicaid for individuals. Or decreasing eligibility <p>CMS Guidance on August 13, State Health Official letter provided to the states</p> <ul style="list-style-type: none"> • CMS extended timeframe for states to complete pending eligibility from 6-12 months from PHE • States must complete redeterminations for all individuals on Medicaid. Letters will be sent to all clients. • Communication plan is under way • Phasing out activities from the pandemic and will be defining communication, establishing a campaign for public and working with stakeholders for communication efforts • “Back on Track” campaign-Electronic and paper communication • Timeline for activities cannot being until the end of the PHE <p>OMB Prescription Update</p> <ul style="list-style-type: none"> • AIR on <i>outpatient pharmacy</i> drug claims are eligible for OMB rate with retroactive date to 03/01/2021. • Pharmacy may dispense unlimited new prescription drugs, single multi-drug compounds, or prescription drug refills in a 24 hour period, OMB rate will be reimbursed. • Excluded DME, Medical supplied and OTC orthotics • All Claims will be reprocessed and adjusted dating back to 03/21 to reflect new rate • MCO’s are required to have all adjustments completed within 120 days from the time that notification is received in which is expected to be by October 15 • Provider Supplement to be released by October 15th 			
VIII. HCBS Spending Plan Update	Tallie Nolan, Bureau Chief of LTSS Bureau Home and Community Based Services (HCBS)			

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	<ul style="list-style-type: none"> • ARPA was finalized and made into law on March 2021 • States received feedback and guidance from government • 10% Increase in federal match for HCBS • Program include Community Based Waiver, PACE programs, DD Waiver and Med Frag, MIVla, BH, HCBS and other • Stakeholder meeting on July 1 committed a proposal with comments and feedback to CMS • Feedback from CMS received 09/27 response due Oct 15 • Requesting for tribal feedback <p>Shelly Begay discussed four pillars of spending plan</p> <p>Rebecca Baca, Director of Elder Affairs, Aging and Long -Term Services Dept</p> <ul style="list-style-type: none"> • We cannot supplant current funds • Provider overview of current efforts under way by ALTSD to get tribal program engaged for HCBS. • Tribal programs are in need of tech assistance and resources and support to get certain programs in community. Models like PACE, respite care, and additional adult care centers, training opportunities, infrastructure for programs, <p>Questions</p> <p>Former Governor Vigil-there was a specific conversation on Title XII. There were individuals that gave insight to current program in WA, WI, OK senior program. Possible reach out and develop a framework. The infrastructure is overwhelming when you look at tribal resources, you need a coder. Get ideas on road mapping. Tribes are challenged with bureaucracy. As a tribal community we are missing key components for tribal infrastructure.</p> <p>Ezra—requested for additional clarity on HCBS. Shelly and Rebecca provided additional information and requested to meet with tribes individually.</p>	<p>Develop workgroup to identify CHR duties that would be reimbursable</p>		

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IX NATAAC Goals and Objective s	Shelly Begay Ran out of time for NATAAC planning and objectives. Moved to next NATAAC meeting			
X. Comments	<p>President Nez- New NATAAC representative. Bluehouse has left the OPVP and now we have a new chief of staff, Dr. James Davis. For appointment for NATAAC, a new form will be sent to have Theresa Galvan for executive staff asst.</p> <p>Ezra Bayles-Possible reimbursement for CHW. Where are we at with the CHR reimbursement. I feel that it has fallen off the radar.</p> <p>Jean Pino—Some of our CHR are also certified at CHW's with state and would they qualify for the reimbursement. We asked Western Sky. We are wanting to find out how CHR/CHW to get a provider code. Can they enroll in Medicaid? We have the NM Southern CHR Association that advocates for all tribes.</p>	<p>Send agenda and attachments prior to meeting</p> <p>Follow up with internal workgroup</p>	<p>Theresa Belanger MAD</p> <p>Shelly Begay</p>	Next NATAAC

Respectfully submitted: Shelly Begay, OOS Native American Liaison- Administrative Officer II