



AIAN Opioid Response Workgroup Minutes  
01/14/2025 3:00 PM PST to 5:00 PM PST  
American Indian Health Commission  
Virtual

No Attendance Recorded

**Tribal Leaders/Representatives:**

**Skokomish** - Daylen Gonzales  
**Squaxin** - Jessica Dolge, Lucy Hill, Ofi Brown  
**Jamestown** - Andrew Shogren  
**Port Gamble** - Emily Arneson  
**Lummi** - Cheryl Sanders

**AIHC** - Vicki Lowe, Lisa Rey Thomas, Pam Priest, Cindy Gamble, Faith Turk, Heather Holzer, Jen Olson, Kathryn Akeah, Terra Horton, Wendy Stevens, Maria Ness  
**NPAIHB** - Birdie Wermy

**Tribal Partners**

**HCA** - Lucilla Mendoza, Nakia DeMiero, Jaron Heller, Jessica Blose, Sara Moltanen-Karr, Sarah Cook-Lalari, Raina Peone  
**DOH** - Candice Wilson, Kathy Pierre, Dan Overton, Michelle Weatherly  
**WAHBE** - Charlene Abrahamson  
**ATG Tribal Liaison** - Asa Washines  
**DSHS** - Heather Hoyle, Leah Muasau, Tim Collins, Sher Stecher  
**OSPI** - Rebecca Purser, Erika Rodriguez  
**Kauffman** - Danica Brown  
**DH** - Megan Mills, Paj Nandi  
**ScalaNW** - Liz Wolkins  
**DCYF** - Shannel Squally-Janzen  
**SWACH** - Mercedes White Calf

? - Michelle Johnson

**I. Welcome/Introductions**

*Facilitators: Vicki Lowe, Lisa Rey Thomas, Lucilla Mendoza*

Moment of silence for LA Fire victims and All Responders as well as the Spokane Tribe following multiple youth losses.

## **II. Review [Meeting Notes from December AIAN ORW Meeting](#)**

Lucy reviewed the minutes from the December 8th meeting.

## **III. [Presentation and discussion on ScalaNW](#)**

*Presenter: Liz Wolkins, ScalaNW*

### **Questions/Comments -**

Vicki asked what her response would be when the hospital quotes 42 CFR part 2 as a way to not coordinate care. Liz does not want to speak outside of her scope and understanding. The key is communication and offered using an approach of.....What is the shared goal? How do we communicate our goal for the best care of the patient? MOU's can be helpful and have been successful for ScalaNW.

Charlene/WAHBE asked how is increasing trust with the hospital achievable? Liz responded that deep trust is not the reality of today but focus on increasing trust for someone that does go to the hospital, they trust they will be taken care and have pain managed. Then people will come when they need, before they are critically ill.

## **IV. Discussion on Barriers and facilitators for Accessing Sublocade**

*Presenter: Jessica Blose, HCA*

Open discussion to identify knowledge gaps after discussions with Steve Kutz, Suquamish Tribe.

What, if any, are some of the barriers that your community, your providers are experiencing and for people that you know that have been interested in receiving this medication, things that they've shared. What would this group like to be presented on this subject at a future meeting. You might need to take this question back to your colleagues/coworkers who are doing some of the frontline work as providers. You could always feel free to send feedback later through Vicki and Lisa or directly to Jessica.

### **Questions/Comments -**

Charlene Abrahamson commented long acting buprenorphine would be something that could be really helpful and save lives for those incarcerated (not in prison) in local and county jails. Jessica suggested it would be helpful to get information around clinical workflow to how does this work with special populations. Charlene added it would be helpful

to hear from those work with the Tribal clinic as well as the court system. Billing is another barrier.

Leta Evaskus reported they are doing the buy and bill through [MMCAP Infuse](#) which is a government group purchasing organization. They just found out if a nonprofit gets state funding, like through this buprenorphine funding program, then they are eligible to then contract through MCAP Infuse to buy other things that MCAP infused contracts for. So that could be other medications. It can be office supplies. It could be medical supplies like hospital beds. So she would just like to encourage any tribal clinics, providers to apply for this funding. It's open and until the funding is spent. So any nonprofit can then continue and set up their own account through MCAP Infuse to get that discounted group purchasing on. They have a whole catalog of who they contract with and what supplies your clinics could need.

## **V. Presentation and Discussion on For Our Lives**

*Presenters: Megan Mills, DH; Paj Nandi, DH*

Megan Hatheway has taken another position at DH so Megan Mills and Paj Nandi will be working with us going forward. They introduced themselves and presented their [slide deck](#). They also shared the Tool Kit link: <https://fornativelives.org/toolkit>

### **Questions/Comments:**

Asa Washines shared that Yakama Nation is doing a similar campaign and shared draft designs they did with a graphics company they used. The graphic designers website is <https://tran-creative.com/tribal/>.

Kathy Pierre asked if DH will be at ATNI in the spring or fall. Megan said they are planning their calendar of events and will get back to her. It is on their radar. They also have the Opioid Summit in May on their calendar.

## **VI. Updates from AIHC and Discussion**

*Presenter: Vicki Lowe*

[Legislative Priorities 2025](#)

[WTOF Taskforce Continuum of Care Workgroup](#)

[STD WA Tribal Opioid Fentanyl Summit - May 20-22, 2025](#)

NPR News article re Traditional Indian Medicine -

<https://www.kuow.org/stories/washington-s-tribes-want-medicaid-to-cover-traditional-healing>

3rd Annual WA Tribal Opioid Fentanyl Summit - May 20-22 at Ilani, Cowitz. Calendar Invites have gone out.

Washington Tribal Opioid Fentanyl Resource Guide is being developed to support all the work that Tribes and Urban programs are doing.

Vicki reminded the group the WA State Tribal Opioid and Fentanyl Task Force meetings are the 4th Tuesday of each month from 9 - 11. The next meeting is January 28th and is an open meeting. They will carry the information from this work group to to the Task Force, especially when it comes to recommendations and those things that might need legislative changes.

## **VII. Updates from DOH**

*Presenter: Michelle Weatherly*

Michelle shared there will be a Listening Session tomorrow re OTP Accreditation Process from 11:00 - 12:00 as part of the 988 Subcommittee/TCBHAB. She also reported that DOH is working on a couple of different rules projects. One is around the Opioid Treatment Program licensing and certification requirements to help align with the revised Federal OTP regulations that SAMHSA has. The other is to implement some legislation around fixed site medication units. They are finishing up and those rules should go into effect probably the end of January, early February.

They are also working on rules for Tribal Attestation fees for Residential Treatment Facilities and also psychiatric hospitals.

## **VIII. Updates from HCA**

*Presenter: Lucy Mendoza, Nakia DeMiero*

One item on their radar was that there was an establishment of a 20% set aside for opioid abatement for future years. An account was establish but nothing provided direction on how the funding would be allocated. It was in Gov Inslee's budget but it is not known if Gov Ferguson will include in his. More to come on this.

Nakia shared she will be reaching out to everyone that has an Opioid Abatement Treatment Plan to set up their second bi-annual check-in which is one of the requirements for that additional second lump sum payment of \$96,774. An email will be coming to Tribes.

## **IX. Updates from ATG**

*Presenter: Asa Washines*

Asa shared that the AG's office got funding in their general fund so they don't need to request funds for the next 2 years for the MMIP Task Force. They will be working with Rep Lekanoff for a no-cost extension that give the authority to keep moving forward. They will also be requesting a proviso for the Boarding School study to extend another 2 years.

## **X. Agenda item for Upcoming Meetings and Wrap Up**

**XI. Closing**