



Tribal Centric Behavioral Health Advisory Board

03/10/2026

American Indian Health Commission
Lucky Eagle Hotel - InPerson

Meeting Materials:

1. **Zoom Record:** https://us02web.zoom.us/rec/share/_cufH3qL_-Z5NAy--owlrQgXC_ZBnkn9eJpzXFY4ud4L09Y9nxuYpefzOdYW3A1G.cQ11hDkAldgru1qy
Passcode: 3n7n=AZE
2. [Meeting Participant List](#)
3. [Meeting Chat](#)

I. Tribal Centric Behavioral Health Advisory Board - A Safe Place for Help

Presented By Vicki Lowe, AIHC, Lucilla Mendoza, HCA, Kathryn Akeah, AIHC

- Participants introduced themselves, stating their roles and affiliations with various tribal health programs.
- Tribal and urban Indian health programs are invited to provide updates on their activities.
- A representative discussed ongoing recruitment efforts to fill positions, including mental health counselors and a re-entry specialist, to enhance services in jails.
- Port Gamble S'Klallam Tribe had a soft opening of their clinic, aiming for broad member access within a few months.
- Cowlitz Indian Tribe is planning a behavioral health conference in October and is implementing the EPIC system by May.
- Cowlitz Indian Tribe is working on outreach to provide mobile clinic services at North sites in King County and Pierce County.
- Lower Elwha Klallam Tribe is onboarding a new mental health professional and establishing an intern program to support future hiring.
- Lower Elwha Klallam Tribe is hosting a youth event, with an upcoming 'Save the Date' shared in the meeting.
- Yakama Nation is co-sponsoring DCR training and hosting a Trauma-Informed Care Conference with a youth track, on specific dates in May and June.
- Yakama Nation plans to integrate cultural specialists from behavioral health into other tribal health programs.

- Suquamish Tribe is organizing a Men's Health Day and is progressing on an OTP project set to open by the end of 2027, funded by state resources.
- Suquamish Tribe is recruiting for several positions, including mental health counselor, wellness department director, compliance officer, and tribal health programs director.

A. Tribal Focus Group for HCA Peer Support Services

Presenter: David DiGiuseppe, HMA. DDiGiuseppe@healthmanagement.com

- Presented by David DiGiuseppe from Health Management Associates (HMA), the healthcare authority was tasked to conduct a feasibility study to expand peer support services in Washington State.
- The study was initiated following the legislation championed by Representative Lauren Davis, House Bill 1427, passed in 2025.
- The bill mandates the healthcare authority to contract HMA to lead the study on expanding peer support services.
- The purpose of the study is to create new billing mechanisms for peer support services with Medicaid and commercial carriers, aiming to improve outcomes and reduce medical expenses.
- Focus groups with various entities, including tribal representatives and health providers, are scheduled to gather insights on peer support services.
- A focus group is scheduled for Thursday, October 19th, from 10 to 11 AM Pacific Time, to discuss the expansion of peer support services.
- Participants are encouraged to share their experiences and perspectives on peer support services to assess current readiness and develop expansion proposals.
- Discussion will include the role and effectiveness of peer support services, barriers faced, and potential for expanding these services.
- Participants can provide feedback and fill out the registration link sent by Maddie Wrolson.
- Those unable to attend the focus group can share thoughts via email to David DiGiuseppe.

B. Tribal Programs Updates (15 min)

C. Crisis System Coordination

Presenter: Kathryn Akeah

- A work group is planned to address crisis system coordination, consisting of an 8-week session starting next Monday at 1 PM. The first four weeks will have set topics related to crisis system protocols, and the subsequent four weeks will be open for emerging topics.
- Registration for the work group is facilitated via a link provided in the meeting materials, which also includes calendar invites and reminders.
- Following the current work group, a second work group focusing on behavioral health codes will be organized with a similar format. Notices for this will be sent a few weeks later to avoid confusion.

- An update on the Washington Suicide Prevention Plan is provided. Suggested language changes and notes from prior work groups will be included in the meeting materials.
- There are calls for tribal inclusions in the overall body of the suicide prevention plan and the creation of a strategic plan appendix comprising recommendations and action items from previous work groups and summits.
- Periodic updates on the status of initiatives related to the suicide prevention plan, including funding developments, are planned every 6 months to a year.
- Several items from the tribal leaders' grid have been funded or completed, reflecting progress on aspects within the suicide prevention plan.
- Acknowledgment and gratitude are extended to the efforts in setting up the work groups originating from the Tribal Crisis Policy Academy.

D. AI/AN BH-ASO: Payment Models and Governance Structure

Presented By Lucilla Mendoza, HCA/OTA

[North Sound ASO](#)

[North Sound ASO Organizational Chart](#)

- Discussion on establishing a tribally operated BHASO (Behavioral Health Administrative Service Organization) driven by recommendations from a 2013 report and a legislative bill passed last year. The plan aims to enhance culturally responsive and federally compliant operations with a statewide reach coordinated with tribal governments.
- North Sound BHASO's operational budget has grown from \$25 million to approximately \$63 million, overseeing a 5-county region with significant responsibilities in crisis systems and various community programs.
- The North Sound BHASO board consists of politicians to enhance community responsibility, with non-voting tribal seats available, showing commitment to local governance.
- Tribes can potentially join the North Sound BHASO Advisory Board, although current seats are non-voting due to legal and governance constraints.
- North Sound BHASO's coordination encompasses crisis meetings across counties, engagement with social determinant providers like housing, and active participation with criminal justice and healthcare systems to support behavioral health continuity.
- Complexities in crisis team funding arise due to braided funding sources, leading to multifaceted contracting methods with healthcare providers for crisis services.
- Explanation of the North Sound BHASO's financial structure involving contracts with MCOs (Managed Care Organizations) for PMPM (Per Member Per Month) payments to manage risks and reconcile cost versus utilization.
- Discussion about ASO reserves highlights challenges due to inadequate reserve limits set during previous legislative cycles, with current reserves often insufficient against unexpected expenses like hospital bills.
- There's ongoing work with HCA actuaries to update reserve limits for ASOs, acknowledging taxpayer dollars involved in reserves and political complexities.

- ASO funding mandates specify crisis system support and coordination with law enforcement and healthcare providers, while optional funding covers non-Medicaid outpatient services and other stabilization programs, depending on available resources.
- Acknowledgement of potential impact from HR1 changes leading to increased uninsured populations and implications for hospital bill payments and reserves management.
- Detailed discussion on the challenges faced by ASOs in relation to insurance payments, especially the lack of payment from private insurers for crisis stabilization services.
- North Sound BHASO is a primary support for Tribal DCR training, indicating collaboration with tribal entities for training and technical assistance implementation projects.
- **Action Item** - Next steps include focusing meetings on drafting the AIAN BHASO operational plan with tribal input on feasible implementations learned from current discussions.
- Lucilla Mendoza commits to sending the latest slides to Heather for inclusion in Onboard.

V. Lunch - 12:00 PM PDT

VI. VOA Monthly Tribal Meeting and 988 Subcommittee - Someone to Contact/Someone to Respond

A. Welcome/Introductions

Presented By Kathy Pierre/DOH, Jeremy Rouse/VOA, Lucilla Mendoza/HCA

- The Tribal 988 Subcommittee will focus on data related to 988 call centers, with various bodies of work planned.

B. VOA Updates

Tribal Policy Academy

Presenters: Shane Lopez-Johnston/NPAIHB, Emily Sitting Dog/PGST

- Jeremy Rouse introduces himself and provides information about the services offered by Volunteers of America, emphasizing the need for cohesive coordination between behavioral health providers and tribes, with tribes playing a central role.
- Emily Sitting Dog from Port Gamble S’Klallam Tribe introduces herself and discusses collaborative efforts in improving the behavioral health crisis system, expressing the desire for further collaboration with state and local partners.
- Shane Lopez-Johnston explains the purpose of the meeting is to discuss metrics developed by the Tribal Policy Academy work group, highlighting difficulties in accessing and understanding data due to unfamiliar systems, and stressing the importance of gathering accurate metrics for service provision.

- Emily Sitting Dog describes the complexity involved in understanding and improving the crisis system and the reliance on emergency response services, noting the challenges in transitioning to 988 crisis response and data collection issues tied to contracted dispatch services.
- Emily Sitting Dog discusses the difficulties in obtaining concrete data to evaluate the need for a mobile crisis response team, and whether it is an appropriate investment, given the lack of data on behavioral health crisis cases.
- Emily Sitting Dog underscores the focus on understanding community needs through metrics, including the impact of 988 implementation and the challenges of data collection for evaluating behavioral health crisis response.
- Shane Lopez-Johnston offers to set up a follow-up meeting for detailed discussion on metrics and the process, inviting participants interested in discussing the development and use of metrics within tribal governance.

VOA Metrics

Presented By Jeremy Rouse, VOA

- Jeremy Rouse presented monthly data metrics, emphasizing record-high call volumes for the Native and Strong initiative. Key performance metrics included a 94% answer rate at under 12 seconds average wait time.
- Action Item - Tribal profiles updated for 29 tribes and Urban Native Health Organizations, with almost all profiles returned, ensuring current and accurate information is maintained.

C. 988 Updates

Presented By Amira Joy Caluya, DOH

- Announcement of a new appointee, Amira Caluya, from the Department of Health moving to the Health Care Authority to work on 988 initiatives and Crisis Response.
- Amira Caluya provided updates regarding the RCL 988 transition. Metrics for the Crisis Coordination Continuum (CCC) are being aligned based on tribal feedback from the Policy Academy.
- Senate Bill 5762, related to the 988 tax line increase, did not pass. The impact on the 988 tech platform remains to be determined.
- Supplemental budgets from the Senate and the House include the 988 initiative, awaiting the final conference budget passing.
- Native and Strong campaign is ongoing, with PSAs potentially increasing call volume. A call for Native veterans to participate in the campaign is made.
- There is an upcoming grant opportunity for the 988 Tribal Response Cooperative Agreements, expected to be posted on April 15th.