



23RD NAVAJO NATION COUNCIL OFFICE OF THE SPEAKER

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MEDIA CONTACTS

Jared Touchin (928) 221-9253
Jolene Holgate (928) 380-4174
Crystalyne Curley (928) 286-7918
nnlb.communications@gmail.com

Delegate Hale provides testimony in support of exemptions to continue providing AHCCCS benefits to Native Americans

PHOENIX – Last Thursday, Council Delegate Jonathan Hale (Oak Springs, St. Michaels) provided testimony to the Arizona House of Representatives Health Committee in support of H.B. 2228, which seeks to amend Arizona law pertaining to the Arizona Health Care Cost Containment System by exempting American Indians and Alaska Natives from certain requirements that would be detrimental to many Navajo people who currently receive AHCCCS benefits.



PHOTO: Council Delegate Jonathan Hale provides testimony to the Arizona House Health Committee in support of H.B. 2228 at the Arizona State Capitol in Phoenix, Ariz. on Feb. 1, 2018.

H.B. 2228, sponsored by Arizona State Rep. David Cook (Dist. 8 – R) would change Arizona statute to insure that Arizona waivers submitted to the U.S. Department of Health and Human Services, which may reduce those eligible for AHCCCS patients, do not apply to Navajo people and other tribes in Arizona.

The Arizona AHCCCS program is subject to Section 1115 of the Social Security Act, which gives the U.S. secretary of Health and Human Services authority to approve experimental, pilot or demonstration projects that the secretary finds likely to assist in promoting the objectives of the Medicaid program. These demonstrations give states additional flexibility to design and improve their Medicaid programs.

Arizona law now requires that AHCCCS submit a Demonstration Project 1115 waiver to the Centers for Medicare and Medicaid Services within HHS, for authority to conduct a pilot program that includes the following:

1. Institutes significant and rigorous work, school or job training requirements on “able-bodied adults”

2. Places a five-year life-time limit on Medicaid services to “able-bodied adults”
3. Develops and imposes modest cost sharing requirements to deter unnecessary use of emergency departments and ambulance services

Delegate Hale, who serves as the chair of the Health, Education, and Human Services Committee, told state legislators that such requirements would be harmful to Navajo families that receive the benefits. He added that the current statute does not address the unique legal status of American Indians who reside in Arizona and receive care that is coordinated between the Medicaid program and the Indian Health Service. This unique legal status and coordination of care arise under the federal trust responsibility to provide health care services to American Indians, as established per an amendment to the Social Security Act.

He further stated that the amendment is reasonable and will help save the lives of American Indians. The amendment leaves intact the larger goal of maintaining Arizona’s flexibility to design and administer Medicaid and Medicare services while upholding the federal trust responsibly to provide health care services from all federal programs including the Medicaid program.

The Council’s State Task Force met with several state legislators in January, including chair of the House Health Committee Rep. Heather Carter (Dist. 15 – R), to advocate for approval of the 1115 waiver during the ongoing state legislative session.

An inter-tribal Workgroup collaborated efforts with the Rep. Eric Descheenie (Dist. 7 – D), Rep. Wenona Benally (Dist. 7 – D), Sen. Jamescita Peshlakai (Dist. 7 – D), the Arizona Advisory Council on Indian Health Care Workgroup, the Inter Tribal Council of Arizona, the Office of the President and Vice President, Navajo Nation Department of Health, and the Council’s Health, Education, and Human Services Committee for the bill.

The Arizona House Health Committee unanimously approved H.B. 2228 with a vote of 9-0, which will also require the approval of the full house and senate members, and Gov. Ducey.

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