Navigator In-Service Day
Seattle-King County Public Health
Bell Harbor Conference Center
September 27, 2019

WoflMask Consultants
Emma Ross Medicine White Crow, MSc
Introduction To Indian Country

- Who is in room?
- Who are your family?
- Where are you from?
Urban Indian Background
Land Acknowledgment

This training takes place on the lands of the Coast Salish peoples, traditional owners of this land—a resilient group of people who honor and bring light to their ancestral heritage. The Muckleshoot Tribe is our Federally recognized treaty Tribe, also we honor the Snoqualmie Tribe, Suquamish and Tulalip Tribes and ancestral land of the Duwamish people.
Federal Trust Responsibility

Article 1, section 8 of the constitution establishes the government-to-government relationship.

Treaties negotiated by the U.S., in return for 400 million acres of Indian lands, created the trust obligation for health, education and social services.
WA State American Indian Demographic Overview

- Total AI/AN population for 2014 was 192,114 (2.9%), of the total state population - the smallest racial/ethnic group in the state
- Washington has the sixth largest AI/AN population - 3.9% of the total 4.9 million AI/AN population in the United States
- 60% of the Washington State AI/AN population reside in urban areas
King County Demographics

An estimated 15,724 (0.8%) individuals identified as AI/AN alone in King County, and an estimated 44,500 (2.2%) individuals identified as AI/AN alone or in combination with one or more races (data not shown). Those who identified as White alone comprised the largest proportion (68.9%) of the total population (1,275,468) in King County. In addition, Asians alone were the second largest population identified in King County, consisting of 305,367 individuals or 15.2% of the total population.
King County Demographic

Population by Race, Seattle Service Area, 2010-2014

- 0.8% American Indian or Alaska Native
- 15.2% Asian
- 6.2% Black or African American
- 5.6% Native Hawaiian or Other Pacific Islander
- 68.9% White
- 0.8% Some other race
- 5.6% Two or more races
Urban Indian Population

- 96,000 AI/ANs live in the Seattle Tacoma metro area
- 35,000 in Spokane, Bellingham and Vancouver
- 130,000 of 215,000 or \( \approx 50\% \) live in metro areas usually along the I-5 corridor
Washington’s Urban Indians

Who they are...

A tribal member living away from their home tribe moved from home state to obtain jobs, school, other opportunities

Tribal members away from their home tribe and out of their tribal Contract Health Service Delivery Area

Alaskan Native sent to Seattle to obtain tertiary care for themselves or a family member
The number of Washington American Indians and Alaska Natives with Medicaid rose from 56,000 in 2012 to 83,600 in 2016. This 49% increase of 27,600 newly Medicaid-covered American Indians and Alaska Natives is evidence of the success of Medicaid expansion in Washington. 39% of the total American Indian and Alaska Native population is covered by Medicaid in 2016 up from 29% in 2012. 45% of females and 34% of males were enrolled in Medicaid in 2016.

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian and Alaska Native Population 2012 and 2016</td>
<td>194,178</td>
<td>211,950</td>
</tr>
<tr>
<td>American Indian and Alaska Native Uninsured 2012 and 2016</td>
<td>42,017</td>
<td>22,484</td>
</tr>
<tr>
<td>Uninsured Rate 2012 and 2016</td>
<td>22%</td>
<td>11%</td>
</tr>
<tr>
<td>Medicaid Enrollment 2012 and 2016</td>
<td>55,956</td>
<td>83,604</td>
</tr>
</tbody>
</table>
Tribal members are not required to report their exempt tribal income to HPF.

This can be any income from the tribe, such as money generated from Grand Coulee dam, fishing, clam harvest, lumber etc.

This income is not included in the household income calculation to determine eligibility.

Individuals should not report this income on their application.

The only tribal income that should be reported is per capita income from gaming.
The ACS estimates that there were 39,000 Medicaid-enrolled American Indians and Alaska Natives without access to IHS-funded health programs in 2012. By 2016 coverage by Medicaid increased by 20,000 to 59,400, an increase of 52%. In 2012, 31% of females had Medicaid coverage and that increased to 45% in 2016. Male coverage increased from 26% to 34%. Overall, 39% of those without access to IHS were now covered by Medicaid health insurance in 2016 up from 28% in 2012.
## WA Tribal Medicaid vs. IHS Enrollment 2012-2016

<table>
<thead>
<tr>
<th>Total Pop</th>
<th>2012</th>
<th>2016</th>
<th>Increase 12-16</th>
<th>% increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Pop</td>
<td>55,956</td>
<td>83,604</td>
<td>27,648</td>
<td>49%</td>
</tr>
<tr>
<td>Male</td>
<td>25,838</td>
<td>35,681</td>
<td>9,843</td>
<td>38%</td>
</tr>
<tr>
<td>Female</td>
<td>30,118</td>
<td>47,923</td>
<td>17,805</td>
<td>59%</td>
</tr>
<tr>
<td>IHS</td>
<td>2012</td>
<td>2016</td>
<td>Increase 12-16</td>
<td></td>
</tr>
<tr>
<td>Total Pop</td>
<td>16,946</td>
<td>24,129</td>
<td>7,183</td>
<td>42%</td>
</tr>
<tr>
<td>Male</td>
<td>7,356</td>
<td>9,979</td>
<td>2,623</td>
<td>36%</td>
</tr>
<tr>
<td>Female</td>
<td>9,590</td>
<td>14,150</td>
<td>4,560</td>
<td>48%</td>
</tr>
<tr>
<td>No IHS</td>
<td>2012</td>
<td>2016</td>
<td>Increase 12-16</td>
<td></td>
</tr>
<tr>
<td>Total Pop</td>
<td>39,010</td>
<td>59,475</td>
<td>20,465</td>
<td>52%</td>
</tr>
<tr>
<td>Male</td>
<td>18,482</td>
<td>25,702</td>
<td>7,220</td>
<td>39%</td>
</tr>
<tr>
<td>Female</td>
<td>20,528</td>
<td>33,773</td>
<td>13,245</td>
<td>65%</td>
</tr>
</tbody>
</table>
Urban Indians—Where are they?

Population distribution:

The following counties have been identified as targeted based on population and AI/AN status.

Uninsured by County and AI/AN Status

(Note: AIAN includes persons of AIAN as one-race or multiple races)

<table>
<thead>
<tr>
<th>County</th>
<th>Uninsured (N)</th>
<th>AIAN (N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>King</td>
<td>93,817</td>
<td>5,592</td>
</tr>
<tr>
<td>Yakima</td>
<td>24,776</td>
<td>2,402</td>
</tr>
<tr>
<td>Snohomish</td>
<td>36,550</td>
<td>1,567</td>
</tr>
<tr>
<td>Kitsap</td>
<td>14,923</td>
<td>1,467</td>
</tr>
<tr>
<td>Whatcom</td>
<td>12,137</td>
<td>1,327</td>
</tr>
</tbody>
</table>
Washington’s AI/AN Tribal Health Services

- Not a Health “System”
- Each tribe is an independent Sovereign Nation
- Dependent on treaties and negotiated agreements. Tribe will have varying allocations for direct care or funding for services outside the clinic. (Purchased and referred care)
- No IHS Hospital or HIS Specialty Care in the region
Native Framework Core Cultural Values

Being People of a Place

Recognizing our Gifts

Tribal Sovereignty

Community and Family
Take Advantage of Excludable Health Insurance and Health Benefits

Fortunately for tribes, Section 139D of the Internal Revenue Code survived both tax reform and efforts to repeal and replace the Affordable Care Act (ACA). This section was added to the tax code by the ACA and states that healthcare benefits provided by the Indian Health Service (IHS), a third-party program funded by the IHS, medical care purchased by the tribe or tribal organization, coverage under accident or health insurance, and any other medical care provided by the tribe or tribal organization is excluded from the gross income of tribal members, and thus exempt from tax. In 2019, tribes who wish to provide healthcare benefits should ensure they are taking full advantage of this section.
Thank-You!

Photo acknowledgment: Thank you to the Health Benefits Exchange, the Suquamish, Muckleshoot and Port Gamble S’Klallam Tribes, also thank you to the National Indian Health Board for the data on AIAN Medicaid