

Position of the Colorado River Indian Tribes in Regard to the Issuance of a Waiver of Changes Affecting American Indians as a Result of the Approval of the Arizona Medicaid Demonstration Project Waiver

On November 28, 2011, the Tribal Council formally adopted the Colorado River Indian Tribes' position to request a waiver of eligibility changes affecting American Indians from United States Department of Health and Human Services, Center for Medicare and Medicaid Services (USDHHS/CMS).

Introduction –

The Colorado River Indian Tribes (CRIT) is a federally recognized Indian Tribe composed of Mohave, Chemehuevi, Navajo, and Hopi members. While located primarily within the Colorado River Valley of west central Arizona, the exterior boundaries of CRIT lands extend into the State of California as well and encompass territories within three counties (La Paz County in Arizona and both San Bernardino and Riverside Counties in California). The entire area is sub-rural in character and is at least two and one-half hours distant from a major metropolitan area providing specialized healthcare. The high cost of transportation in emergency circumstances is therefore always a concern.

In regard to economic demographics, CRIT members can be considered highly disadvantaged in the aggregate with a 60-70% unemployment rate and an even higher percentage of uninsured members. These members have only the limited IHS benefits to rely upon without additional healthcare coverage. Severe limitations over coverage are imposed upon such individuals which greatly impacts upon their ability to obtain quality healthcare absent catastrophic circumstances.

Position -

The approval by the United States Department of Health and Human Services, Center for Medicare and Medicaid Services (USDHHS/CMS) of the waiver of changes affecting American Indians requested by the State of Arizona is essential to maintaining the current standard of care afforded to American Indians. It is the expressed intent of Congress in the reauthorization of the Indian Healthcare Improvement Act that efforts continue to improve the level of healthcare provided to American Indians residing in Indian Country. The recent reauthorization of this legislation is indicative of ongoing concerns expressed by many in the American Indian community and demonstrated through various federally funded research projects that American Indians are often disadvantaged, as a result of location, by a lack of available quality healthcare. While the federal government has made great strides in recent years in addressing these concerns, the discrepancies between levels of healthcare remain, and the changes in Medicaid (AHCCCS) eligibility resulting from the approval of Arizona's waiver without the subsequent approval of the waiver of the same changes as they would otherwise apply to American Indians will only serve to exacerbate the discrepancy previously mentioned.

The hardship likely to be imposed upon American Indians as a result of the freeze on enrollment of childless adults is great. The very high percentage of poverty and unemployment within CRIT lands is indicative of a likelihood that the impact upon CRIT members will be disproportionately greater than upon the general public at large. Lacking healthcare insurance, many CRIT members will be left without the resources to acquire adequate healthcare or healthcare related transportation. The unreimbursed burden on the IHS system will increase substantially but without improving the present standard of care. Healthcare issues of CRIT members without insurance, unless considered "catastrophic," will likely go

untreated, resulting in a more costly burden (in terms of both human factors and actual financial costs) at a later date.

The Colorado River Indian Tribes therefore joins the Inter-Tribal Council of Arizona and the various Arizona Native American Nations in requesting that a waiver of eligibility changes effecting American Indian, as requested by the State of Arizona, be promptly approved.