Tribal Opioid/Fentanyl Prevention, Education and Awareness Campaign Workgroup

September 24, 2025 Meeting Notes 1:00 pm - 3:00 pm

Co-Chairs: Steven de los Angeles, Council Member, Snoqualmie Tribe; Lucilla Mendoza, Health Care Authority (HCA); Candice Wilson, Department of Health (DOH)

Attendees: Stacie Munro, Behavioral Health Care Coordinator, Confederated Tribes of the Chehalis Reservation; Tracy Gillett, Human Resources Manager, Hoh Indian Tribe; Morgan Snell, Tribal Health Planner, Jamestown S'Klallam Tribe; Maureen Kinley, Council Member, Lummi Nation; Mona Miller, Director of Re-entry and Community Family Services, Puyallup Tribe of Indians; ; Jessica Williams, Program Coordinator, Puyallup Tribe of Indians; Brycelynn Greene, CPC CSP Peer Support, Quinault Indian Nation; Steven de los Angeles, Council Member, Snoqualmie Indian Tribe; Annie Estes, Community Services Director, Spokane Tribe of Indians; Julie Owens, Director of Operations, Squaxin Island Tribe; Leonard Forsman, Chair, Suguamish Tribe; Steve Kutz, Squamish Health Division Director, Suguamish Tribe; Nakesha Edwards, Mental Health Programs Manager, Swinomish Indian Tribal Community; Marilyn Scott, Council Member, Upper Skagit Indian Triba; Christa McAllister, Case Manager, Upper Skagit Indian Tribe; Michael Tulee, Executive Director, United Indians of All Tribes Foundation (UIATF); Meera Forespring, Community Navigator, UIATF; Scott Pinkham, Equity Program Director, UIATF; Laura Kluever, Tribal Assister Support, American Indian Health Commission (AIHC); Lisa Rey Thomas, AIHC; Heather Holzer, PR and Communications, AIHC; Larissa Molina, Project Manager, Northwest Portland Area Indian Health Board; Shannel Squally-Janzen, Tribal Prevention Specialist, Department of Children, Youth and Families (DCYF); Art Caballero, Juvenile Rehabilitation, DCYF; Rosalinda Fivekiller-Turk, Tribal Engagement Director, Department of Health (DOH); Nicki Ostergaard, Director of Health Promo and Education, DOH; Gerry RainingBird, Suicide Prevention Program, DOH; Renee Tinder, Management Analyst, DOH: Mary Beth Brown, Management Analyst, DOH: Leah Muasau, Tribal Contracts Coordinator, Department of Social and Health Services (DSHS) Office of Indian Policy (OIP); Sher Stecher, Tribal Relations Manager, DSHS OIP; Brenda Francis-Thomas, Regional Manager, DSHS OIP; Heather Hoyle, Regional Manager, DSHS OIP; Michelle Johnson, Tribal Affairs Administrator, DSHS Behavioral Health and Habilitation Administration; Julie Jefferson, Statewide Tribal Relations Administrator, DSHS Economic Services Administration (ESA); Marcy Jordan, LPA, DSHS ESA; Charlene Abrahamson, Tribal Liaison, Health Benefit Exchange; Lucilla Mendoza, Tribal Behavioral Health Administrator, Health Care Authority (HCA); Nakia DeMiero, Tribal Opioid Response Coordinator, HCA; Paul Davis, Health Care Program Specialist, HCA; Anne Paulsen, State Opioid Response Communications Consultant, HCA; Henry Strom, District Superintendent, Office of the Superintendent of Public Instruction; Andrea Baron, Boulder Care; Stephen Martin, Boulder Care; Jade Waits, Boulder Care; Shannon Boustead, PhD, Boulder Care; Andrea Baron, Boulder Care; Rob O'Claire, Boulder Care; Jackie Happel, HCA; Kristopher Shera, HCA; Paj Nandi, Desautel Hage (DH); Megan Mills, DH

Welcome, Blessing, Introductions

Steven de los Angeles, Council Member, Snoqualmie Tribe

Opening Remarks and Tribal Campaign Updates

Steven de los Angeles, Council Member, Snoqualmie Tribe Lucilla Mendoza, HCA & Candice Wilson, DOH Tribal Representatives

- Council Member de los Angeles said the October meeting will be moved to October 29 so as not to conflict with the Centennial Accord, and a new meeting invite will be sent out.
- Council Member de los Angeles shared the workgroup has made progress in bringing together Tribal and state partners to work on Tribal opioid/fentanyl behavioral health, education and awareness messaging.
- Council Member de los Angeles recapped presentations from the last workgroup meeting.

Task Force Legislative Priorities: Family & Community Services

Lisa Rey Thomas, AIHC

Lisa Rey shared an update on the Tribal health legislative priorities for the 2026 session.

- Continue funding the WA Tribal Opioid Task Force and Summit from Opioid Abatement Settlement funds.
 The cost is about \$40,000 for the Summit and workgroups, \$250,000 annually for the summit and \$10,000 for reporting.
- · Continuum of Care

- Funding for Tribally or UIHO-operated behavioral health facilities and housing, expanding services so
 folks can be treated in their community. The request is for \$50 million.
- Require hospitals to use community benefit funds to hire peer support and recovery coaches to get folks into services who receive care in emergency rooms for overdose.
- Utilize Medicaid Transformation 2.0 funds for hospital and behavioral health staff to receive training in trauma-informed care that includes intergenerational trauma, have care coordination agreements and share information with Tribal healthcare providers.

Public Safety and the Justice System

- Fund an annual Tribal Law Enforcement Conference. The cost is about \$40,000 per year.
- Fund Tribal Juvenile Courts Pilot Project through federal grants, about \$200,000.
- Provide \$2.9 million for 16 regional drug taskforce with Edward Byrne Memorial Judge Advocates General funding.

Housing and Wrap Around Services

- Increase eviction prevention funding and dedicate state resources to rental arrears, court related eviction forgiveness and application fee coverage. The cost is about \$1million.
- Develop and distribute print based resource directories. The cost is about \$1million.
- Leverage the Foundational Community Supports Program, Supportive Employment and Supportive Housing services through the Medicaid Transformation Waiver for a Tribal set aside to be administered by the Native Hub. The cost is about \$700,000, 10% of the current budget.
- o There is a need to fund training for staff at Tribes to be housing navigators.

Family and Community Services

- Youth impacted from opioids are getting in trouble at school. Federal and state funds are needed to have 30 Tribal liaisons in schools statewide to help them stay in school, about \$5 million per year.
- Continue funds allocated for different prevention campaigns, including the 988 Native and Strong Lifeline, Opioid Prevention, Treatment and Recovery using opioid abatement funds of \$3 million per year.
- Develop policy support use of culturally based evidence to fund Tribal/Indigenous prevention services, and leverage IHS and SAMHSA funds for projects. The cost is \$5 million per year in addition to the WSTPS allocation of \$1 million.
- Develop culturally based evidence comprehensive list building upon existing best practices list, about \$200,000.

Community Response

- Identify where RCW or WAC needs to change scope of work to support more providers who can address patients with co-occurring needs for mental health services and SUD treatment.
- Organize a gathering of storytellers to help reduce and eliminate stigma and promote cultural approaches to prevention and treatment. Connect this to the Summit and conferences such as ATNI and the MMIWP Summit.

Boulder Care Telehealth

Laura Monico, Andrea Baron, Jade Waits, Shannon Boustead, Rob O'Claire, Boulder

Boulder Care is a virtual telehub for recovery that:

- highlights the need for autonomy and patient choice.
- helps youth ages 13-17 with opioid use disorder, and adults 18+ with alcohol and opioid use disorder.
- accepts Medicaid and commercial plans.
- Has case management, peer support with lived experience, medical assistants and liaisons in the community to help bridge the gap
- has a virtual option and meets folks where they are at.
- works with folks facing reentry, in foster situations, and communities in poverty.
- is looking to partner with Tribal, natal and other sites to do research using grant funding received.
- can provide research patients with smartphones that have network connectivity and they can keep them after they complete the survey, and will also receive compensation.
- will provide participating sites with \$2,500.

Wraparound with Intensive Services (WISe)

Paul Davis, HCA

Paul shared WISe

- is designed for youth are eligible for Apple Health coverage, are 20 or under and have complex behavioral health needs
- is offered in-home and community settings
- offers 24/7 crisis support
- utilizes wraparound principles and phases

- utilizes a team-based approach. The team includes a Care Coordinator, a Youth Partner, or a Parent Partner and a Clinician.
- Care Coordinator maintains an average caseload of 10 or few participants with a maximum of 15.
- Anyone can make referrals to WISe.
- Eligibility is supported by a child and adolescent needs and strengths (CANS) screening, within 14 days.
- There's a referral list of provider agencies and most accept managed care and fee for service.
- The WISe agency is licensed as a BHA to provide "intensive services" and coordinates additional services that include SUD, Applied Behavioral Analysis, medical/dental and developmental delay support services.
- WISe services are available statewide. Most counties have in-person WISe provider locations. In SFY 2023, there were 863 youth identifying as AI/AN that participated in WISe. There are some distances for folks in various areas.
- For folks considering to be a WISe provider, it pays \$4,270/youth/month that covers services such as
 intensive care coordination, child and family team meetings, and time for staff to participate in required WISe
 trainings. There's a different case rate for managed care members.

Tribal and Urban Indian Organization representatives have shared concerns that there's a lack of Tribal engagement on curriculum development, WISe services are not reaching AI/AN youth and AI/AN youth are not receiving culturally attuned services. HCA has met with Tribes that have an interest in partnering to provide WISe in their area, has convened a Tribal CANS group for a few years to adapt make it more culturally competent and has a strong partnership with HCA Office of Tribal Affairs to address individual and systemic concerns and opportunities.

CANS is a tool that helps tell the stories of areas of growth and strengths and puts them into numbers that can be used to compare outcomes of similar folks, screen for level of care offered through WISe and be used for care planning and outcome measurement. Paul shared the scale showing how it's quantified, and how data for needs is reduced over time for those who are in the program. If folks have questions, please send them to wisesupport@hca.wa.gov.

Opioid Settlement Update

Kris Shera, HCA

Kris shared State Opioid Settlement allocations for previous bienniums and what is currently known about the 2025-27 biennium, a flow chart of how the funding works and how much each agency has appropriated. Settlement payments decrease over time and the current biennium is less than the last. Agency leaders make recommendations to the Governor's Office for use of the funds. He shared the short, medium and long term projection items to consider. He is doubtful there will be much remaining into the next legislative session. There will be more details to share in the coming months.

For Our Lives Campaign Update

Meg Mills and Paj Nandi, Desautel Hege (DH)

DH shared campaign materials and media buys. They have expanded the campaign to create new materials for Native youth, and some that are focused on MOUD as a form of treatment and revised prevention materials. The materials included posters, rack cards, brochures, that are included in the toolkit for youth. Media buys are mixed tactics including digital that began September 1, and television ads that begin in October. There has already been an increase in downloads of new materials. Native artists were hired to create campaign materials.

Planning for Native American Heritage Month

Nakia asked what folks have planned for Native American Heritage Month, and if there was interest to plan an event in this setting.

- Rebecca shared OSPI did a small event one year that helped folks learn more about Native American heritage.
- Council member Scott shared the Upper Skagit Tribe has a Native Transformation research video that could be shared. The video is stories that were shared about opioid recovery. Lisa Rey Thomas asked her to share the video with her for an event.
- Mona said the Puyallup Tribe has their Honorary Ceremony on October 3.
- Folks posted various flyers and resources in the chat.
- When folks have events that are occurring, please send them to Nakia at Nakia.DeMiero@hca.wa.gov. Also, please send her any event suggestions for Native American Heritage Month.

Meeting Wrap-Up/Next Agenda

Steven de los Angeles, Council Member, Snoqualmie Tribe Lucilla Mendoza, HCA & Candice Wilson, DOH

Council member de los Angeles asked folks if they had suggestions for the next meeting agenda. Please reach out to Nakia.DeMiero@hca.wa.gov or Sher Stecher at Sher.Stecher@dshs.wa.gov with suggestions.

Here are agenda items that will be presented at the next meeting.

- Injectable Naloxone Presentation
- NorthStar Update

Adjourn