



**NORTHWEST  
PORTLAND  
AREA  
INDIAN  
HEALTH  
BOARD**

Burns-Paiute Tribe  
Chehalis Tribe  
Coeur d' Alene Tribe  
Confederated Tribes of Colville  
Confederated Tribes of Coos, Lower  
Umpqua, and Siuslaw Indians  
Confederated Tribes of Grand Ronde  
Confederated Tribes of Siletz Indians  
Confederated Tribes of Umatilla  
Confederated Tribes of Warm Springs  
Coquille Tribe  
Cow Creek Band of Umpqua  
Cowlitz Indian Tribe  
Hoh Tribe  
Jamestown S'Klallam Tribe  
Kalispel Tribe  
Klamath Tribe  
Kootenai Tribe  
Lower Elwha Klallam Tribe  
Lummi Nation  
Makah Tribe  
Muckleshoot Tribe  
Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NW Band of Shoshone Nation  
Port Gamble S'Klallam Tribe  
Puyallup Tribe  
Quileute Tribe  
Quinault Indian Nation  
Samish Indian Nation  
Sauk-Suiattle Tribe  
Shoalwater Bay Tribe  
Shoshone-Bannock Tribes  
Skokomish Tribe  
Snoqualmie Tribe  
Spokane Tribe  
Squaxin Island Tribe  
Stillaguamish Tribe  
Suquamish Tribe  
Swinomish Tribe  
Tulalip Tribe  
Upper Skagit Tribe  
Yakama Indian Nation

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**Resolution # 17-04-01**

**Support for the Tribal Epidemiology Center (TEC) to Apply for CDC  
funding for Enhanced TEC capacity**

**WHEREAS**, the Northwest Portland Area Indian Health Board (hereinafter "NPAIHB" or the "Board") was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

**WHEREAS**, the Northwest Portland Area Indian Health Board is a "tribal organization" as defined by the Indian Self-Determination and Education Assistance Act (P.L. 93-638 seq. et al) that represents forty-three federally recognized tribes in the states of Idaho, Oregon, and Washington (Portland Area Tribes); and

**WHEREAS**, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USCS § 450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

**WHEREAS**, NPAIHB is dedicated to assisting and promoting the health needs and concerns of Indian people; and

**WHEREAS**, the primary goal of the NPAIHB is to improve the health and quality of life of its member Tribes; and

**WHEREAS**, the Patient Protection and Affordable Care Act, Indian Health Care Improvement Act 25 US Code (18) § 1621m, Epidemiology centers states:

a. "Functions of (Tribal Epidemiology Centers or) TECs: In consultation with and on the request of Indian tribes, tribal organizations, and urban Indian organizations, each Service area epidemiology center established under this section shall, with respect to the applicable Service area—

- collect data relating to, and monitor progress made toward meeting, each of the health status objectives of the Service, the Indian tribes, tribal organizations, and urban Indian organizations in the Service area;
- evaluate existing delivery systems, data systems, and other systems that impact the improvement of Indian health;

- assist Indian tribes, tribal organizations, and urban Indian organizations in identifying highest-priority health status objectives and the services needed to achieve those objectives, based on epidemiological data;
- make recommendations for the targeting of services needed by the populations served;
- make recommendations to improve health care delivery systems for Indians and urban Indians;
- provide requested technical assistance to Indian tribes, tribal organizations, and urban Indian organizations in the development of local health service priorities and incidence and prevalence rates of disease and other illness in the community;
- provide disease surveillance and assist Indian tribes, tribal organizations, and urban Indian communities to promote public health.”

b. “The Director of the Centers for Disease Control and Prevention shall provide technical assistance to the centers in carrying out this section” (the functions listed above).

c. “Epidemiology center(s) shall be treated as a public health authority(s) for purposes of the Health Insurance Portability and Accountability Act of 1996 (HIPAA; Public Law 104–191; 110 Stat. 1936).”

(Note: The HIPAA Privacy Rule - Standards for Privacy of Individually Identifiable Health Information - provides national standards for protecting the privacy of health information. The Privacy Rule regulates how certain entities, called covered entities (i.e. health plans, health care clearinghouses, and health care providers), use and disclose certain individually identifiable health information, called Protected Health Information (PHI). The Privacy Rule expressly permits covered entities to disclose PHI, without authorization, to public health authorities (i.e. agencies or authorities of the United States, states, territories, political subdivisions of states or territories, American Indian tribes, or an individual or entity acting under a grant of authority from such agencies and responsible for public health matters as part of an official mandate) for public health purposes including but not limited to public health surveillance, investigations, and interventions.)

**WHEREAS**, the Centers for Disease Control and Prevention have released a funding opportunity to enhance the infrastructure of individual Tribal Epidemiology Centers to provide data and technical assistance to tribes in their region, entitled: PPHF-2017-Building Public Health Infrastructure in Tribal Communities to Accelerate Disease Prevention and Health Promotion in Indian Country (CDC-RFA-DP17-1704PPHF17), which is specifically for Tribal Epidemiology Centers.

**WHEREAS**, the Northwest Tribal Epidemiology Center has a 20 year history of leadership in providing epidemiology services and technical assistance to the Portland Area Tribes.

**WHEREAS**, enhanced data provision, training provision and staffing to provide such services are aligned with the Strategic Plan of the Board.

**THEREFORE, BE IT RESOLVED** that the Northwest Portland Area Indian Health Board supports the application of the Northwest Tribal Epidemiology Center to enhance and build data infrastructure, training and technical assistance to the Portland Area Tribes.

CERTIFICATION

NO. 17-04-01

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 26 for, 0 against, 0 abstain on July 18, 2017.

*Andrew C. Joseph Jr.*

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Chairman

July 18, 2017  
Date

*Drey J. Abraham*  
\_\_\_\_\_  
Secretary