

**GOVERNMENT-TO-GOVERNMENT
2020 ACTIVITY REPORT**

DEPARTMENT OF CONSUMER AND BUSINESS SERVICES

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PROGRAMS AND SERVICES:

The mission of the Department of Consumer and Business Services is to protect and serve Oregon's consumers and workers while supporting a positive business climate.

DCBS is Oregon's largest business regulatory and consumer protection agency. We are a resource to consumers and businesses in the areas of workers' compensation, occupational safety and health, financial services, insurance, and building codes.

Our goals:

Protect consumers and workers in Oregon.

Regulate in a manner that supports a positive business climate.

Be accountable to the public we serve, with excellent service to our customers.

DEPARTMENTAL STATEMENT:

The Department of Consumer and Business Services promotes positive relationships between the department and the tribes. Although few DCBS regulatory programs affect the tribes because of their sovereign status, there are occasions when the tribes choose to receive services. In addition, the department often provides education and outreach to the tribes on issues such as homeownership, workplace safety and health, and Medicare. DCBS has an agencywide policy that promotes such communication.

A. BUILDING CODES DIVISION (BCD)

1. Issue Name:

Building department services

Issue Description:

The Confederated Tribes of Umatilla Indian Reservation (CITUR) requested that the division provide plan review, inspection, and building official services on certain projects on tribal land. The division has had an intergovernmental agreement (IGA) with the tribe since 2014.

Action Taken:

Through its Pendleton field office, BCD will continue to provide the services of a building official, who is certified to perform building official duties in Oregon. In 2019, the division notified the tribe that multiple factors, including difficulty hiring for the division's operational functions, may hinder its capability to continue to provide adequate ongoing services. The current agreement provides availability to the services of a building official by phone during normal business hours; this service is available only related to projects for residential structures and for which commercial plan review has previously been conducted or in progress by DCBS.

Actions Planned:

The division will continue to provide building department services as requested by the tribes through March 1, 2022. At that point, BCD will re-assess services to the tribes, as well as other recipients of contract services.

2. Issue Name:

Boiler inspection services

Issue Description:

Occasionally, a tribe will request an inspection or consultation regarding boiler equipment located and operated on tribal land. These requests come at irregular intervals and affect a different program than the site-built inspection services described on the first issue. The division charges an hourly rate for consultation and inspection services in this program.

Action Taken:

The division provides consultation and inspection services through the boiler program as requests are received.

Actions Planned:

The division will continue to provide boiler-related services as requested by the tribes.

B. OCCUPATIONAL SAFETY AND HEALTH DIVISION (Oregon OSHA)

1. Issue Name:

Occupational safety and health

Issue Description:

Tribal lands, including reservations and trust lands, pose a unique jurisdictional situation with regard to occupational safety and health regulations. Federal OSHA has jurisdiction over tribal governments and tribal enterprises, as well as private-sector

businesses performing work on tribal and trust lands. Federal OSHA requires states to maintain jurisdiction over public-sector employers performing work on tribal lands. Because federal and state occupational safety and health standards are nearly identical, this separation of authority has caused little or no confusion for affected employers and employees. Oregon OSHA maintains a close working relationship with federal OSHA, so either agency can help employers and employees and direct them to the appropriate resources.

2. Issue Name:

Occupational safety and health education, consultation, and the Resource Center

Issue Description:

Although Oregon OSHA does not have regulatory jurisdiction over tribal governments and enterprises, the division makes education, consultation, and Resource Center services available to these entities at no cost.

Actions Taken:

Oregon OSHA provides safety and health outreach services to the nine tribes in Oregon by offering, upon request, consultations, conferences, workshops, training, and education. For the period Oct. 1, 2019, through Sept. 30, 2020, the following services were provided to members of the Oregon tribes:

Consultations:

- Confederated Tribes of Grand Ronde (1 consultation), Umatilla Confederate Tribes (2 consultations), Warm Spring Confederate Tribes (4 consultations)

Public Education Training Courses:

- Thirty-nine tribal members completed Oregon OSHA online training courses
- Workshop – Fall Protection, Confederated Tribes of Grand Ronde (two people)
- Resource Center – Cow Creek Health, Cow Creek Band of Umpqua Tribe of Indians – 5 Safety and Health Videos

Safety and Health Conferences:

Oregon OSHA co-sponsored two safety and health conferences this year in Bend and Eugene (several cancelled events due to COVID-19 precautions). Tribal organizations attended workplace safety and health conferences as follows:

- Seven Feathers Casino Resort – Cow Creek Band of Umpqua Tribe of Indians (two people)

Actions Planned:

Oregon OSHA will continue to provide consultations, education, and Resource Center services upon request. Oregon OSHA is available to make presentations to tribal entities or associations on safety or health topics, as well as the occupational safety and health services available to them.

C. Oregon Health Insurance Marketplace (OHIM) and Senior Health Insurance Benefits Assistance (SHIBA)

Issue Name:

Education, training, and enrollment help for insurance coverage specializing in qualified health plans (QHP) and Medicare.

Issue Description:

Health coverage education and training of tribal elders and Tribal/Indian Health Services (IHS) staff members with the nine federally recognized Oregon tribes:

- Burns Paiute Tribe
- Confederated Tribes of the Coos, Lower Umpqua, and Siuslaw Indians
- Confederated Tribes of Grand Ronde
- Confederated Tribes of Siletz Indians
- Confederated Tribes of Umatilla Indian Reservation
- Confederated Tribes of Warm Springs
- Coquille Indian Tribe
- Cow Creek Band of Umpqua Tribe of Indians
- Klamath Tribes

Actions taken and contacts made:

- Marina Cassandra is the tribal liaison for OHIM and SHIBA.
- Cassandra participated on the planning sessions for the quarterly Senate Bill 770 Health and Human Services Cluster meetings and attended scheduled meetings.
- Cassandra provided updates from the Marketplace to tribal health contacts via email or phone as soon as they became available.
- Cassandra connected via email and phone with representatives of the Oregon tribes and Native American Rehabilitation Association (NARA) about assister trainings.
- OHIM outreach staff members had in-person or virtual contact with tribal assisters who attend the monthly Oregon Health Authority/OHIM collaborative sessions.
- SHIBA staff members offered 35 education sessions for American Indian beneficiaries. SHIBA counselors provided 92 one-on-one counseling sessions for tribal members.
- In January, Cassandra responded to an inquiry from the Siletz Community Health Clinic on a Medicaid issue. Cassandra and Katie Button, OHIM plan management analyst, worked on a complex insurance billing issue with a tribal member. Throughout the year, Cassandra also helped other tribal members with health insurance coverage, billing issues, and questions about the Affordable Care Act.
- Cassandra tabled and conducted outreach at the Wacipi Winter Powwow at the Portland Community College, Sylvania Campus on Jan. 18, 2020.
- Cassandra reached out to the various tribes to offer support for upcoming health fairs and other events that later were canceled due to the pandemic.
- In February, Cassandra distributed the OHIM customer satisfaction survey to tribal health contacts. She also responded to various inquiries and questions to staff members from tribal health clinics.
- From February to August, Cassandra responded to various inquiries from tribal health staff members about the annual assister certification training through the Marketplace.
- In March, Various tribal health offices notified Casandra of staff and schedule changes due to the pandemic restrictions.

- Cassandra attended a COVID-19 discussion with Title VI grantees via webinar. She distributed information via email about health coverage and COVID-19 to tribal health contacts, as well as COVID-19 price gouging hotline information. She also emailed information to tribal health contacts about OHIM and SHIBA schedules, office closures, and teleworking due to COVID-19.
- In April, Cassandra contacted tribal health contacts about participating in the Get Help locator tool on the OHIM website. She also shared information via email about Health Resources and Services Administration (HRSA) funding and rapid response webinars for employees and business going through layoffs.
- Cassandra attended the national COVID-19 briefing calls with state, local, and tribal officials in April and May.
- In June, Cassandra emailed invitations to tribal health assisters for the virtual Medicare counselor training. Cassandra referred various staff members from tribal clinics to SHIBA for questions on Medicare counselor training.
- Cassandra participated in a Health and Human Services (HHS) Indian Country Update call. She distributed updates from DCBS to tribal health professionals about nondiscrimination of gender identity in insurance.
- Cassandra communicated via phone with tribal leaders to discuss the legislative concept to transfer OHIM to the Oregon Health Authority (OHA). After phone discussions, she followed up via email with several people about the legislative concept.
- In July, Cassandra attended the virtual CMS Tribal Technical Advisory Group meeting.
- Cassandra and Donna Delikat, SHIBA field officer, presented at the CMS/ITU Region 10 web-based training Aug. 19, 2020.
- From July through September, Cassandra responded to questions and inquiries from staff members at Chemawa Indian Health Center about the training platform, technical assistance, requirements, registration issues, and training follow-up.
- Cassandra facilitated the Marketplace assister certification training for tribal assisters via webinar on Aug. 27, 2020. Following the Marketplace assister training, Cassandra responded to inquiries from various tribes about certification training and provided individual coaching in September and October.
- Cassandra communicated via email with Billing Manager at Coquille Indian Tribe in January, March, May and October about claims issues and a training exam inquiry.
- Cassandra attended Legislative Commission on Indian Services (LCIS) special meeting via webinar, on Sep. 18, 2020.
- In September, Cassandra communicated via email with coordinator at Coquille Indian Tribe about the Native Caring Conference.
- Cassandra presented at the CMS/Indian Health Services, Tribal Health Programs, and Urban Indian Programs (ITU) meeting. Due to the pandemic, the meeting was held virtually in the summer.
- Cassandra distributed information via email to tribal health contacts on special enrollments for Marketplace and Medicare related to wildfires.
- Cassandra attended the LCIS meeting webinar on Sept. 29, 2020.
- In October, Cassandra sent the 2021 insurance plan spreadsheet to all tribal assister contacts. She also distributed the 2021 Federal Poverty Level (FPL) charts to tribal assisters for Marketplace and Oregon Health Plan eligibility. She also

forwarded information on Provider Relief Fund Phase 3 General Distribution to all tribal health contacts.

- Cassandra corresponded with an assister from the Grand Ronde Health and Wellness Clinic regarding a consumer’s overlapping coverage with OHP and a Marketplace plan.
 - Cassandra corresponded on various occasions with NARA Northwest.
 - Cassandra referred to SHIBA a billing issue about a Medicare Advantage plan and employer coverage from the Coquille Indian Tribe Community Health Center.
 - Cassandra attended the Oregon Native American Chamber (ONAC) “The Gathering 2020” via live stream that was held Oct. 15, 2020.
 - Cassandra attended the Oregon Native American Chamber (ONAC) networking luncheons held in January, May, July, and November.
 - Contact frequency was significantly affected by the COVID-19 pandemic response. Offices closed to the public, reduced hours of operation for many clinics, state and tribal restrictions on nonessential travel, social distancing, and other factors led to a reduction of in-person meetings, trainings, and participation in outreach events.
- **2020 Tribal Relations Satisfaction Survey Results (11 responses were received)**

1. How well do Marketplace plans meet the needs of the community you serve?

- | | |
|--|--------|
| a. Extremely well | 27.27% |
| b. Very well | 9.09% |
| c. Somewhat well | 18.18% |
| d. Not so well | 9.09% |
| e. Not at all well | 0.00% |
| f. I have no direct experience with this | 36.36% |

Comments:

“limited to rural areas.”

“For the lion's share of native members that I have referred to the FFM for coverage, they have been exceedingly happy with both cost & quality.”

2. I feel I know where to go for my Marketplace questions or concerns.

- | | |
|-------------------------------|--------|
| a. Strongly agree | 54.55% |
| b. Agree | 18.18% |
| c. Neither agree nor disagree | 27.27% |
| d. Disagree | 0.00% |
| e. Strongly disagree | 0.00% |

Comments:

“I predominantly deal with Medicaid and refer my FFM clients out to a contact, but I have several resources that I can turn to.”

3. How responsive has the Oregon Health Insurance Marketplace been to your questions or concerns about Marketplace plans?

- | | |
|--------------------------|--------|
| a. Extremely responsive | 54.55% |
| b. Very responsive | 18.18% |
| c. Somewhat responsive | 9.09% |
| d. Not so responsive | 0.00% |
| e. Not at all responsive | 0.00% |

f. Not applicable 18.18%

Comments:

“We have 5 Benefit Coordinators at our facility in Central Oregon. All of them know exactly what organization to go to for answers to questions. We so appreciate the Oregon Health Insurance Marketplace for their assistance with keeping our Central Oregon patients and our clinic aware of health coverage changes.”

“I usually work directly with the Tribal Liaison when I have complicated question and she always has time for me.”

4. Overall, which of the following words would you use to describe the Oregon Health Insurance Marketplace 's services? Select all that apply.

- | | |
|--|--------|
| a. Reliable | 45.45% |
| b. High quality | 45.45% |
| c. Useful | 63.64% |
| d. Ineffective | 0.00% |
| e. Poor quality | 9.09% |
| f. Unreliable | 0.00% |
| g. I have had too little experience to comment | 18.18% |

Comments:

“All the DCBS staff are always helpful and informative”

“Extremely reliable, we have 24-hour call backs with answers and information from this organization”

“I would like to note that these answers are for AIAN members only.”

5. Additional comments, questions, or concerns:

“Very good office that provides valuable service to Oregonians.”

“Marketplace plans are not available to Native Americans and their families when there is employer insurance available to the Native American employee and the monthly premium (lowest cost for employee) is below 9.81 % of monthly gross income. That rule creates a barrier for Native American families--to have no insurance due to cost...”

“It would be informative to know since COVID 19, how the enrollment numbers are being affected.”

“It may be a good idea to add more staff since our Native patients are living longer healthier lives! Again, thank you Oregon Health Insurance Marketplace!”

“I would only like to point out 2 things. 1) The cost-to-quality ratio drops significantly for non-native individuals. 2) The Affordability for an employee vs. family coverage is NOT relative. It is unaffordable in most cases and it really needs to be amended.”

Tribal elders, tribal members, and Indian Health Services can save money by receiving annual counseling, education, and trainings through OHIM and SHIBA. These programs continue to help IHS service coordinators with applications for qualified health plans on HealthCare.gov, Medicare savings programs such as the Oregon Health Plan, qualified Medicare beneficiary benefits, and the low-income subsidy for Medicare Part D.

Actions planned:

OHIM and SHIBA will continue to provide health coverage education, counseling, and trainings, and offer a strong presence and collaboration on tribal health issues.

OHIM will continue to attend and support the Tribal Health and Human Services quarterly meetings. The OHIM tribal liaison will continue to increase knowledge and understanding of health coverage issues specific to American Indians and Alaskan

Natives. OHIM plans to increase Marketplace outreach and capacity of application assistance for tribal consumers.

D. DIRECTOR'S OFFICE (DO)

General Activities:

1. DCBS Director Andrew Stolfi and Ruth Kemmy, manager of multicultural communications, are the tribal liaisons for the department.
2. DCBS staff members attended Tribal Government Day at the state capitol on March 5, 2020.
3. Kemmy became co-chair of the Economic Development and Community Services Tribal Cluster in the spring of 2019. In order to keep the tribes informed of resources available during the COVID-19 pandemic, the tribal co-chairperson and Kemmy decided to hold monthly GoToMeetings, instead of quarterly meetings.
4. DCBS is a member of the Oregon Native American Chamber (ONAC). Diversity, Equity, and Inclusion Manager Veronica Murray and other DCBS staff members attend the bi-monthly luncheon meetings.
5. Executive Order 17-12 established the Task Force on Oregon Tribal Cultural Items in November 2017. Kemmy is the cultural items liaison for DCBS. On Nov. 14, 2019, the agency submitted a first draft of the cultural items report. Following recommendations from the task force and the LCIS executive director, the department did an agencywide survey. A final report, including survey results, was submitted in September 2020.
6. Stolfi attended the Health and Human Services Cluster on July 8, 2020.
7. Stolfi attended the American Indian and Alaska Native Liaison Committee (NAIC) meeting on Aug. 3, 2020.
8. Stolfi attended the Health and Human Services Cluster Economic Development and Community Services Tribal Cluster meeting on Aug. 21, 2020.
9. Stolfi attended the Health and Human Services Cluster on Oct. 14, 2020.
10. Director Stolfi and various DCBS staff attended the Annual Government-to-Government Summit Tuesday, on Dec. 1-2, 2020.

Actions Planned:

DCBS will continue to attend and support the Tribal Health and Human Services and the Economic Development cluster meetings and their activities.

DCBS will continue to offer a strong presence and collaboration on tribal health issues through the Oregon Health Insurance Marketplace.

DCBS understands the importance of the work the Tribal Cultural Items Task Force is doing and will continue to support their efforts.

The department will continue to provide information about its services and programs and identify areas that could benefit or serve the tribes. DCBS will continue to maintain its positive relationships with the nine Oregon tribes.