



Tribal Health ADVISOR

CRIHB

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CRIHB Invites the National Indian Health Board to Meet with Tribal Leaders and Healthcare Representatives

Earlier this year, the California Rural Indian Health Board (CRIHB) invited the National Indian Health Board (NIHB) to send a representative to meet with Tribal leaders and Tribal healthcare representatives from CRIHB’s membership. NIHB responded by sending its Federal Relations Director, Devin Delrow, member of the Navajo Nation, to tour the Tribal communities and Tribal clinics with CRIHB Chief Executive Officer, Mark LeBeau, citizen of the Pit River Nation.

Devin met with Tribal Chairs and Board Members and listened to their experiences and concerns, maintaining the open communication between the two health boards. The intent of the meetings was to enhance NIHB’s knowledge of California Tribes, especially their healthcare needs. This information is useful for NIHB to draw upon when engaging in planning meetings with federal agencies in Washington, DC. The meetings achieved the intended impact and were proven to be worthwhile for all parties involved.

Devin and Mark traveled across the state to meet with representatives of 25 Tribes and multiple Tribal clinics between February and March of 2018. They logged over 1,700 miles in a CRIHB vehicle, while engaging in deep conversations about Tribal healthcare, community wellness, and additional work that is needed at the national, regional, and local levels to further enhance health services for Tribal people.



Devin Delrow at Bear River

Along the way, a few old time Indian stories were shared.



Devin Delrow and Mark LeBeau at United Indian Health Services

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California Rural Indian Health Board, Inc.

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Tule River Indian Health Center, Inc.

Denise Padgette & LaWanda Quinnell
United Indian Health Services, Inc.

Kevin Townsend
Warner Mountain Indian Health Program

* Delegates to be determined
Chapa-De Indian Health Program, Inc.

CRIHB Officers

Dr. Mark LeBeau - Chief Executive Officer
Marilyn Pollard - Chief Operations Officer
Ron Moody - Chief Financial Officer
Susan Dahl - Chief Compliance Officer

CRIHB Invites NIHB (cont.)

There is strong interest from NIHB to return to California to meet with additional Tribal leaders and Tribal healthcare representatives to promote the importance of working with this region to build a lasting rapport.

Nationally, CRIHB is a founding member of NIHB, an organization that represents Tribal governments from 12 Indian Health Service (IHS) Areas—including those that operate their own healthcare delivery systems and those receiving healthcare directly from the IHS. NIHB focuses on national issues related to Indian health including: advocacy, policy formation and analysis, legislative and regulatory tracking, research on Indian health issues, program development and assessment, and training and technical assistance programs.



Devin visiting Tribal communities and representatives

Legislative Report

The Trump Administration's proposed Fiscal Year (FY) 2019 budget for the Indian Health Service (IHS) requested \$263.7 million below the FY 2018 enacted level, at \$5,274,023,000. The request includes \$150 million for the Special Diabetes Program for Indians and bill language to change its funding from mandatory to discretionary spending. The Administration proposes to reinstate two provisions from the FY 2016 Appropriations Act for IHS which are contrary to the Indian Self-Determination and Education Assistance Act (ISDEAA) with regard to contract support costs (CSC). The first is the "carryover" clause that could be read to deny the CSC carryover authority granted by the ISDEAA; the other is the "notwithstanding" clause used by IHS to deny CSC for their grant programs.

The Administration proposes to delete all funding for the Community Health Representatives (currently funded at \$62.8 million), the Health Education (currently funded at \$19.8 million), and the Tribal Management programs (currently funded at \$2.4 million). It's likely that Congress will not go along with these proposals.

For FY 2018, the Indian Health Care Improvement Fund (IHCIF) was funded at \$72,280,000. The FY 2018 House Report language notes the funds are provided "in order to reduce disparities across the IHS system." FY 2018 bill language provides that the IHCIF "may be used, as needed, to carry out activities typically funded under the Indian Health Facilities Account." Mark LeBeau, CRIHB Chief Executive Officer, serves on the IHCIF workgroup. The workgroup has been meeting since the beginning of the year and hopes to have recommendations regarding a distribution formula by late May, after which Tribal consultation will occur.

During CRIHB's annual March on Washington, Tribal leaders were able to observe the Senate Committee on Indian Affairs vote on and pass the Restoring Accountability in the IHS Act of 2017 (S. 1250). The legislation would enact comprehensive reforms at IHS to increase agency transparency and accountability, improve patient care standards, and strengthen the recruitment and retention of qualified medical staff. One of the provisions would require IHS to implement a service-wide centralized credentialing system for licensed health professionals seeking to provide

health care services at multiple facilities. The legislation reflects extensive feedback and information gathered by the committee since 2010, as well as close collaboration between the House, Senate, Administration, Indian Tribes, and Tribal organizations. The committee voted to advance the legislation to the full Senate.

California State Budget Surplus Is Billions Bigger than Expected

Governor Jerry Brown announced his May Revision to the state budget on May 11. This year's tax revenues are coming in at almost \$3 billion ahead of what the Department of Finance projected in January. The budget surplus swells to \$8.8 billion in Gov. Brown's 16th and final year, leading the state to stash billions of dollars in reserves. The budget reflects increased expenditures in the Medi-Cal program of approximately \$543.7 million over the 2017-2018 state budget. The increase is primarily owed to retroactive payments of drug rebates to the federal government and a higher estimate of Medi-Cal managed care costs.

In his proposal, \$312 million will go to mental health services, both to help counties provide services and to train mental health professionals. For Tribal Health Programs that are designated in medically underserved or Health Professional Shortage areas, this can prove very beneficial. Similarly, due to the partnership with advocates on a youth reinvestment fund proposal, CRIHB is well positioned to leverage new mental health support to service American Indian/Alaska Native youth, consistent with the governor's priority on at-risk teens.

Gov. Brown's proposal calls for the state to direct another \$3.2 billion into a separate budget reserve that is used for emergencies like natural disasters. CRIHB continues to diligently look into funding opportunities for Indian health providers and Tribal governments. Given the increased likelihood of more wild fires to come this season (May to October) and other disasters, CRIHB will need to play a key role along with the Indian Health Service California Area Office to help CRIHB members become better prepared and coordinate efforts regionally.

CRIHB Partners with DT-Trak Consulting

To assist in strengthening Tribal Health Programs, CRIHB has joined forces with DT-Trak Consulting, Inc. The organization focuses on six Keys to a High-Performance Revenue Cycle: people, processes, technology, metrics/analysis, communication, and leadership. With their expertise, DT-Trak can increase Tribal clinic revenues, decrease billing and coding errors, and ultimately improve both the patient and the facility experience while providing a tailored experience to address each facility's unique needs.

DT-Trak is Indian owned and operated, serving Tribal facilities across the United States. They provide professional medical claims management, revenue enhancement, training and on-site consulting services and have worked with over 100 IHS and Tribal Facilities. DT-Trak has successfully completed over 170 IHS and Tribal contracts, including support to all 12 IHS Area Offices. Their staff consists of licensed coders, Medical Insurance Specialist-certified billing professionals, and certified ICD-10 trainers. For more information, email information@dt-trak.com.



CRIHB Initiates Certified Lifestyle Coach Training

CRIHB has two staff who are now Certified Lifestyle Coaches. Diana Zamora, Registered Nurse, and Christy Tonel, Provider Outreach Coordinator, are on the path to become Master Trainers who can provide Lifestyle Coach Training for the National Diabetes Prevention Program. Having Master Trainers allows Tribal Health Programs to scale and sustain their Diabetes Prevention Program (DPP) over time and ensures the DPP educators are properly trained.

Effective April 2, 2018, the Medicare DPP allows beneficiaries to participate in a DPP that fits their needs and allows clinics to bill for these efforts. The prevention program aims to reduce the risk of type-2 diabetes through evidence-based efforts.



Diana Zamora and Christy Tonel with fellow Certified Lifestyle Coaches

How to Become Eligible for Reimbursement:

1. Has your DPP curriculum been recognized by the Centers for Disease Control and Prevention?
2. Are your DPP educators Certified Lifestyle Coaches?
3. Have you collected at least one year of data on your program participants?

If you answered "Yes" to all three questions, you are eligible to become a Medicare DPP Supplier. Please contact Diana Zamora at dzamora@crihb.org or Christy Tonel at ctonel@crihb.org if you have questions or need assistance.

Increasing Our Wellness VIBE –Visions, Interventions, Blessings, and Education

Each year, CRIHB's Research and Public Health Department hosts a Wellness Conference committed to sharing resourceful knowledge with member Tribal Health Programs and their communities. The three-day event took place on April 3-5 at the Maidu Activity Center in Roseville, California. In addition to the Wellness Conference, the Advancing California Opportunities to Renew Native health Systems (ACORNS) and the California Indian Tobacco Education (CITE) projects held a Resource Meeting for over 22 Tribes/Tribal Health Programs/Tribal Organizations who were awarded subcontracts in the 2017-2018 project year.

Presentations during the Wellness Conference focused on supporting this year's theme: *Increasing Our VIBE –Visions, Interventions, Blessings, and Education*. Speakers shared their knowledge of Successful Community-Based Health Interventions, facts about the Affordable Care Act, Human Papilloma Virus, Domestic Violence: Impact on Rural Native Women, Practicing Gratitude to Increase Happiness, Cancer Survivorship, Opioid Epidemic, Hepatitis C Prevention, and Harm Reduction. Some of the presentations at the Resource Meeting included Tobacco Cessation Talking Circle, Native Cooking demonstration, Indigenous and Plant Solution for Healing, and Strategies to Build Community Wellness.

In addition to the presentations, participants had an opportunity to share their thoughts on wellness—how and why they stay healthy. An integral component in the work CRIHB provides is to understand the perspective of the Tribal communities CRIHB serves and make sure they have the tools needed to be successful. A number of participants provided positive feedback expressing their appreciation for the enthusiastic staff, well-planned presentations, and the knowledge they gained about how to actively promote wellness in their communities.



Participants shared why they stay healthy



Cooking demonstration led by CRIHB staff



Participants shared messages of wellness



Conference participants from over 22 Tribes, Tribal Health Programs, and Tribal Organizations

CRIHB's Annual March on Washington

CRIHB policy team and management staff led the annual March on Washington on April 10-12, 2018. Participants from CRIHB's membership included Tribal Chairs, Councilmembers, community members, and Tribal Health Program staff. Groups met with dozens of lawmakers and/or their staff over the course of the three-day event. The primary focus during the trip was meeting with members of Congress who sit on committees related to Indian affairs, appropriations, or who represent districts where CRIHB member Tribes are located. California Tribal health delegates met with Congressman Pete Aguilar, Congressman Paul Cook, and Congressman John Garamendi. Issues discussed include equitable access to Indian Health Service (IHS) health care facility construction and support funding for the IHS California Area, continuation of the IHS Community Health Representatives program, Increased IHS Purchased/Referred Care Program funds for the IHS California Area, and Congressional action to clarify 340B Drug Pricing Program requirements without narrowing the scope of discounts.

Tribal leaders also discussed the importance of sharing the knowledge gained on Capitol Hill with youth in their communities. Many agreed that cultivating youth leadership is key to continuing advocacy work for Indian healthcare. During meetings with legislative representative, group participants shared the difficulties of getting Native youth to apply for scholarships and internships related to legislative work. Tribal leaders agreed to take this message back to their Tribes and encourage youth to participate in Tribal healthcare issues that affect their communities.



From top left: Tour of National Republican Congressional Committee, meeting at Cannon Congressional House Office Building, tour of Federal Emergency Management Agency, meeting with a congressional representative, meeting with Congressman Pete Aguilar.

Achieving Excellence through the Accreditation Association for Ambulatory Health Care

CRIHB sponsored a two and a half day training provided by the Accreditation Association for Ambulatory Health Care (AAAHC). Tribal Health Program representatives from the CRIHB membership attended March 27-29, 2018. Tribal clinic staff came from northern and southern California to the CRIHB office to learn about the process and advantages of obtaining accreditation.

Dr. Mark LeBeau, CRIHB Chief Executive Officer, stated at the training, “I am very excited about this collaboration between CRIHB and AAAHC. The ability of Tribal health clinics to achieve accreditation and maintain that accreditation over time bodes well for our patients. Providing quality care is our number one priority.”

CRIHB is dedicated to supporting Tribal clinics by providing them with resources to enhance their performance and improve the quality of healthcare services. Alana Perez-White, CRIHB’s Health Systems Development Director, stated, “CRIHB is very excited to make this important training available to our member Tribal Health Programs at no cost. The important standards set by AAAHC set the foundations for patient-centered care and are at the center of providing high quality care to our communities.”

The training consisted of a comprehensive review of AAAHC Core Standards and the process of how Tribal clinics can reach those standards. Attendees participated in break-out sessions focusing on how to identify opportunities for meaningful improvement in their clinics. Moreover, the training offered opportunities for Tribal clinic staff to ask specific questions, express their concerns, and provide feedback.

AAAHC is a private, non-profit organization and is the leader in developing standards to advance and promote patient safety, quality care, and value for ambulatory health care through peer-based accreditation processes, education, and research.



ACCREDITATION ASSOCIATION
for AMBULATORY HEALTH CARE, INC.

Youth Suicide Prevention Training Available through CRIHB's Native Connections Project

Joel Herrera, CRIHB's Native Connections Project Coordinator, shared the risk and protective factors for suicide with youth from the Tule River Tribe – Future Generations Program, an on-going prevention program providing prevention activities to youth and the community of Tule River.

Through the Native Connections grant, Joel provides youth suicide prevention trainings and workshops for Tribal communities. The Native Connections Project is structured to support participating Tribal Health Programs in CRIHB’s membership by providing them with resources that will improve the health and wellbeing of youth in their communities. If you are interested in receiving a training, contact Joel at jherrera@crihb.org.



Joel Herrera providing training to Tule River Tribal youth

Congratulations to the Clinical Medical Assistant Graduates!

CRIHB is proud to announce 14 students graduated from the inaugural class of the Clinical Medical Assistant Training Program. In June, the graduates will be eligible to take the national exam to become a Certified Clinical Medical Assistant. This innovative program is first of several training programs being developed by CRIHB to simultaneously address Tribal and Tribal Health Program needs.

The program brings together students drawn from Tribal communities within the CRIHB membership and connects them through interactive video conferencing technology with instructors from San Francisco State University (SFSU). This creates a “virtual” class that uses a variety of ways to provide instruction beyond the typical classroom setting. To this end, CRIHB and SFSU collaborated to create a curriculum which is tailored for Tribal Health Programs. CRIHB staff provided trainings in HIPAA compliance, NextGen electronic health record competencies, patient-centered team-based care concepts, and other skills that today’s Medical Assistants (MA) need to know to be effective at Tribal clinics. In addition, the class participated in four in-person weekend training sessions at SFSU to learn skills such as taking vitals and phlebotomy.

Moreover, CRIHB staff understands that the design of the program should serve as a pathway for Tribal community members to begin a career in healthcare while staying in their own community, surrounded by family, social supports and minimizing financial burden. Experience as an MA can then serve as a stepping stone to future training to become a nurse, mid-level provider, or even a physician. In the end, this program is about creating

pathways for Tribal communities to lay the groundwork to care for their own, strengthening their expression of sovereignty and self-determination. The next step is to provide the Community Health Representative Training this summer and to launch a Medical Scribe Training Program in the spring of 2019. For more information please contact Christy Tonel, ctonel@crihb.org.

Congratulations to the first graduating class from the following Tribes and Tribal Health Programs:

1. Alina Valenzuela – Big Valley Rancheria – Sonoma County Indian Health Project
2. Andre Maldonado – Hopland Band of Pomo Indians – Sonoma County Indian Health Project
3. Barbara Gordon – Pit River Tribe
4. Diana Thompson – Pit River Tribe – Pit River Health Services
5. Patsy Thompson – Pit River Tribe – Pit River Health Services
6. Alicia Stra – Cloverdale Rancheria – Sonoma County Indian Health Project
7. Jamie Gibson – Tule River Tribe – Tule River Indian Health Center
8. Sammie West Lake – Fort Bidwell Paiute Indian Community
9. Sylvir Williams – Tule River Tribe
10. Maura Hall – ANAV Tribal Health Clinic
11. Tahvooche Chavez-Saulque – Utu-Utu Gwaitu Paiute Tribe – Chapa-De Indian Health Program
12. Macey Hester – Dry Creek Rancheria – Sonoma County Indian Health Project
13. Marta Villarruel – Pit River Tribe – Pit River Health Services
14. Ceslie Villegas – Tule River Tribe



Graduating class of the Clinical Medical Assistant Program



Christy Tonel presenting at the Medical Assistant Program Training

California Rural Indian Health Board, Inc.



Community Health Representative Training Program

Program Goal

This online training will strengthen the skills, knowledge, and abilities of those who help connect community members with health and social services.

In Partnership With



The Benefits

- 2 in-person trainings at CRIHB
July 13 & August 31, 2018
- 6 week online course
- Learn and practice core community health skills
- Certificate of completion

Eligibility

This training is available to employees and community members associated, either by Tribal affiliation or employment, with the following CRIHB-contracted member Tribal Health Programs and their affiliated Tribes:

- ANAV Tribal Health Clinic
- Mathiesen Memorial Health Clinic
- Pit River Health Services, Inc.
- Sonoma County Indian Health Project, Inc.
- Toiyabe Indian Health Project, Inc.
- Tule River Indian Health Center
- United Indian Health Services, Inc.
- Warner Mountain Indian Health Program

2 students will be accepted per area. Lodging will be provided for this training.

How To Apply

Complete and submit applications to
CHR@carih.org or via fax at 916-929-7246.

Please contact Christy Tonel at 916-929-9761 for
program questions.



California Rural Indian Health Board, Inc.
4400 Auburn Blvd., 2nd Floor
Sacramento, CA 95841
(916) 929-9761

2018 Calendar of Events

June 4-8	CAIHS Physiology & Pharmacology - Holiday Inn Express & Suites Cal Expo
June 22-24	Youth HIV Prevention Training - Location to Be Determined
June 29	Finance Committee Meeting - Location to Be Determined
July 4	Independence Day Holiday (Observed)
July 19-21	Board of Directors, Tribal Leaders, & Clinic Directors Meeting - Roseville CRIHB Building
July 19-21	Youth Leadership Conference - Roseville CRIHB Building
August 9-10	CAIHS Culturally Competent Treatment Practices - Roseville CRIHB Building
September 3	Labor Day Holiday (Observed)
September 28	CA Native American Day (Observed)
October 18-20	49th Annual Board of Directors, Tribal Leaders, & Clinic Directors Meeting - Roseville CRIHB Building
October 24-26	Tribal Prep Native Youth Leadership Curriculum Training - Roseville CRIHB Building
October TBD	Finance Committee Meeting - Roseville CRIHB Building
November 12	Veteran's Day Holiday (Observed)
November 22-23	Thanksgiving Holiday (Observed)
December 25	Christmas Day (Observed)

Request for Community Events!

Have any upcoming events in your area that you would like CRIHB department staff to attend?

Please send your health/wellness fairs, walk/runs, or any other community events information to CRIHB.



Attn: Melissa Barham, Administrative Assistant
mbarham@crihb.org
Ph: 916.929.9761
Fax: 916.929.7246



**The California
Rural Indian
Health Board,
Inc. is hiring!**

Do you have passion for elevating and promoting the health status and social conditions of others?
 Are you interested in a career in community health?
 If so, visit www.crihb.org to view current employment opportunities with CRIHB!



The California Rural Indian Health Board, Inc.

Quarterly Board of Directors, Tribal Governments Consultation Committee, and Program Directors Meeting

July 19-21, 2018



TENTATIVE AGENDA

THURSDAY, JULY 19

9:00 AM – 5:00 PM Registration
9:00 AM – 1:30 PM CRIHB Grand Opening
1:30 PM – 5:00 PM Dance Groups

FRIDAY, JULY 20

8:00 AM – 4:00 PM Registration
9:00 AM – 4:00 PM Tribal Governments Consultation
Committee (TGCC) Meeting (Board Room A)
9:00 AM – 4:00 PM Program Directors Meeting (Board Room B)

SATURDAY, JULY 21

8:00 AM – 12:00 PM Registration
9:00 AM – 5:00 PM CRIHB Board of Directors Meeting

**JOIN US AT THE
NEW CRIHB OFFICE!**

**1020 Sundown Way
Roseville, CA 95661**

LOCAL HOTEL

Holiday Inn Express
1398 E. Roseville Pkwy
Roseville, CA 95661
916-774-6060

*Best Western Plus
Orchid Hotel and Suites*
130 N Sunrise Ave
Roseville, CA 95661
916-784-2222

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SIGN UP FOR OUR NEWSLETTER!

Contact: Melissa Barham
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CRIHB MEMBER TRIBAL HEALTH PROGRAMS

Anav Tribal Health Clinic
 9024 Sniktaw Lane
 Fort Jones, CA 96032
 530.468.4470

K'ima:w Medical Center
 P.O. Box 1288
 Hoopa, CA 95546
 530.625.4261

Sonoma County Indian
 Health Project, Inc.
 144 Stony Point Rd
 Santa Rosa, CA 95401
 707.521.4545

Chapa-De Indian Health
 Program, Inc.
 11670 Atwood Avenue
 Auburn, CA 95603
 530.887.2800

Mathiesen Memorial
 Health Clinic
 P.O. Box 535
 Jamestown, CA 95327
 209.984.4820

Toiyabe Indian
 Health Project, Inc.
 52 TuSu Lane
 Bishop, CA 93514
 760.873.8464

Feather River Tribal
 Health, Inc.
 2145 5th Ave.
 Oroville, CA 95965
 530.534.5394

Pit River
 Health Services, Inc.
 36977 Park Avenue
 Burney, CA 96013
 530.335.5090

Tule River
 Indian Health Center, Inc.
 P.O. Box 768
 Porterville, CA 93258
 559.784.2316

Greenville Rancheria
 Tribal Health Program
 P.O. Box 279
 Greenville, CA 95947
 530.284.7990

Redding Rancheria
 Tribal Health Center
 1441 Liberty Street
 Redding, CA 96001
 530.224.2700

United Indian Health
 Services, Inc.
 1600 Weeot Way
 Arcata, CA 95521
 707.825.5000

Karuk Tribal Health
 & Human Services
 P.O. Box 1016
 Happy Camp, CA 96039
 530.493.5305

Riverside-San Bernardino County
 Indian Health, Inc.
 11980 Mt. Vernon Ave.
 Grand Terrace, CA 92313
 909.864.1097

Warner Mountain Indian
 Health Program
 P.O. Box 247
 Fort Bidwell, CA 96112
 530.279.6194