



“Empowering Tribal Nations: Transforming Vision Into Action.”



615-879-7183



yoniconsultingservices@gmail.com



Traditional Medicine State Waiver Template

March 11, 2026





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615-879-7183
vonaconsultinaservices@gmail.com

- A demonstration waiver seeks to expand Medicaid for those using IHS and Tribal services, enhancing culturally appropriate care for American Indian and Alaska Native communities with health needs.
- CMS's approval follows the attached expenditure authorities, special terms, and conditions. The state can only deviate from Medicaid requirements as specified in the following documents.



Traditional Healing Waiver Request Fact Sheet



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vonacultinaservices@gmail.com

From an American Indian perspective, traditional healing practices are a fundamental element of Indian health care that helps patients achieve wellness.

Traditional healing services, while beneficial to members, have not been approved as covered Medicaid services in most states, despite it being promoted in the Indian Health Care Improvement Act and by Indian Health Service (IHS). Only:

- Oregon, Arizona, California, New Mexico

Tribes have advised AHCCCS that traditional healing services will aid care coordination and help AHCCCS members achieve improved health outcomes.



AHCCS Traditional Healing -Timeline



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AHCCCS Traditional Healing Request Timeline





Traditional Healing Waiver Proposal:



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vonaconsultingservices@gmail.com



AHCCCS - waiver authority to reimburse traditional healing services when provided in, at, or as part of services offered by Indian Health Service, a tribe or tribal organization, or an Urban Indian health program (I/T/U) facilities at the 100% Federal Medical Assistance Percentages (FMAP).



Upon approval by CMS, the covered traditional services, limitations, and exclusions shall be described by each facility working with each tribe they primarily serve.



The array of practices provided by traditional healers shall be in accordance with an individual tribe's established and accepted traditional healing practices as identified by the Qualifying Entity.



An I/T/U facility or clinic governing body may serve as the Qualifying Entity or the tribe(s) served by the facility may choose to designate another governing body as its Qualifying Entity to define what constitutes as a traditional healing service



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vonaconsultinaservices@gmail.com

- In accordance with section 1115(a) of the Social Security Act (the Act), the Centers for Medicare & Medicaid Services (CMS) is approving New Mexico's request to amend the demonstration titled "New Mexico Turquoise Care" (Project Number 11-W-00285/6) (the "demonstration"), to provide expenditure authority for coverage of traditional health care practices. This approval is effective from October 16, 2024, through December 31, 2029, upon which date, unless extended or otherwise amended, all authorities granted to operate this demonstration will expire



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vonaconsultinaservices@gmail.com

Elements/Framework

Program description requirements: States must summarize the demonstration's goals, objectives, rationale, hypotheses to be tested, geographic scope, timeframe, and any effects on existing Medicaid or CHIP components.

Eligibility information: The application should detail populations affected by the demonstration, including income levels, eligibility standards, enrollment limits, projected eligible individuals, and any changes in eligibility procedures or long-term services income treatment.

Benefits and cost sharing: States must indicate if benefits or cost-sharing differ from the Medicaid/CHIP State plan, provide charts specifying benefit packages and copayments, describe any long-term services offered, and address premium assistance programs if applicable.



Elements /Framework



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- **Delivery system and payment rates:** The template requires a description of the delivery system(s) used, including managed care or fee-for-service models, geographic scope, enrollment mandates, provider selection, and payment methodologies including capitation and quality-based payments.
- **Implementation details:** States should describe the implementation schedule, participant notification and enrollment processes, and managed care contracting procedures if applicable.
- **Financing and budget neutrality:** The application must include narrative and data on demonstration financing, historical expenditures, enrollment projections, and budget neutrality forms covering a five-year period.



Elements /Framework



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vonaconsultinaservices@gmail.com

Waivers and expenditure authorities: States need to list proposed waivers and expenditure authorities related to Titles XIX and XXI, explaining their purpose and usage.

Public notice requirements: The document outlines requirements for public comment periods, hearings (including teleconferencing/web options), notification mechanisms, summaries of comments received and responses, and tribal consultation certifications. Emergency application exemptions are also addressed.

Demonstration administration contact: The template requests contact information for the state's point of contact for the demonstration application



NM Turquoise



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vonaconsultingaservices@gmail.com

- Traditional health care practices vary widely by Tribe, facility, and geographic area. Under this amendment, traditional health care practices received through IHS, Tribal, or urban Indian organization facilities will be covered when provided to a Medicaid beneficiary who is able to receive services delivered by or through these qualifying providers



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- Whether a beneficiary is able to receive services **from a qualifying provider will be determined by the applicable provider**
- To be covered, the traditional health care practices must be provided by practitioners or **providers who are employed by or contracted with one of these** facilities (which could include an urban Indian organization contracted with an IHS or Tribal facility), in order to ensure that the practices are provided by culturally appropriate and qualified **practitioners at facilities that are enrolled in Medicaid.**



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- **. The qualifying facility is expected to make the following determinations and to provide documentation of these determinations to the state, upon request:**
- **Each qualifying facility is responsible for determining that each practitioner, provider, or provider staff member employed by or contracted with the qualifying facility to provide traditional health care practices**
- **1) is qualified to provide traditional health care practices to the qualifying facility's patients; and**
- **2) has the necessary experience and appropriate training. The qualifying facility also is expected to: 1) establish its methods for determining whether its employees or contractors are qualified to**



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The qualifying facility also is expected to:

- 1) establish its methods for determining whether its employees or contractors are qualified to provide traditional health care practices,**
- 2) bill Medicaid or CHIP for traditional health care practices furnished only by employees or contractors who are qualified to provide them, and**
- 3) provide documentation to the state about these activities upon request.**



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bonaconsultinaservices@gmail.com

- **As discussed in State Health Official letter #16-002, IHS facilities and facilities operated by**
- **Tribes and Tribal organizations under the Indian Self-Determination and Education Assistance Act “may enter into care coordination agreements with [non-IHS or Tribal] providers to furnish certain services for their patients who are [American Indian and Alaska Native] Medicaid beneficiaries, a**



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vonaconsultingaservices@gmail.com

- *Budget Neutrality*
 - **This expenditure authority is also limited to coverage for Medicaid beneficiaries who are able to receive services from those facilities**
- *Monitoring and Evaluation*
- *Consideration of Public Comments*



Oregon Tribal Based Practices



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vonacultinaseservices@gmail.com

1. Adventure based
2. Basketball against alcohol and drugs BAAD
3. Baby doll cradle
4. Canoe journey - Family
5. Ceremonies and rituals
6. Cradle boards
7. Cultural camp
8. Domestic violence group treatment for men
9. Family unity
10. Healthy relationship curriculum
11. Horse program

1. Native American community mobilization
2. Native American storytelling
3. Positive – Indian parenting
4. Powwow
5. Promoting peace with family – Tribal based mediation
6. Round dance
7. Sweat lodge
8. Talking circle
9. Tribal crafts
10. Tribal family activities
11. Tribal youth conference

• **Traditional Tobacco**
Is a sacred medicine
Used by Tribes with prayer
Not meant for addiction

Each Tribe has unique Teachings.



Oregon Tribal Based Practices



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Oregon Tribal Based Practices (TBPs)

Means those programs that are based on cultural principals that have been traditionally used in tribal communities since time immemorial. The practices are culturally validated utilizing the process that was established and are approved by the review panel of tribal representatives. 22 currently approved practices include:

Adventure Based, Basketball Against Alcohol and Drugs (B.A.A.D.), Baby Doll Cradle, Canoe Journey – Family, Ceremonies and Rituals, Cradle Boards, Cultural Camp, Domestic Violence Group Treatment for Men, Family Unity, Healthy Relationship Curriculum, Horse Program, Native American Community Mobilization, Native American Story-Telling, Positive-Indian Parenting, Powwow, Promoting Peace with family-tribal based mediation, Round Dance, Sweat Lodge, Talking Circle, Tribal Crafts, Tribal Family Activities, Tribal Youth Conference

1. Currently done (since time immemorial) in communities, by individuals, families

2. Currently done (since 2005) utilizing state/other funding to Tribes/NARA through grants/contracts for prevention, treatment, recovery, and other areas of health

3. Implementation of Medicaid reimbursement (OHP) after receiving approval from CMS for, **Traditional Health Care Practices** utilizing the OR TBPs model. OR Administrative Rules include - Eligibility to Receive Tribal Based Practices, Delivery of Traditional Health Care Practices to Qualifying Individuals, Reimbursement for the Delivery of Tribal Based Practices, Provider Qualifications for **Traditional Knowledge Keepers (are designated by each I/T/U)**. **Billing system is created.**

4. The **Tribal Traditional Health Worker (TTHW)** is a new worker type under OHA's Traditional Health Worker program whose training curriculum may include aspects of Peers, Community Health Workers, Navigators, etc. The TTHW will support the use of TBPs .

10/17/2025