



Office of Indigenous Medicine Program

Presented by

Melinda White, RN, MSN

Chief Executive Officer

Sage Memorial Hospital



PURPOSE

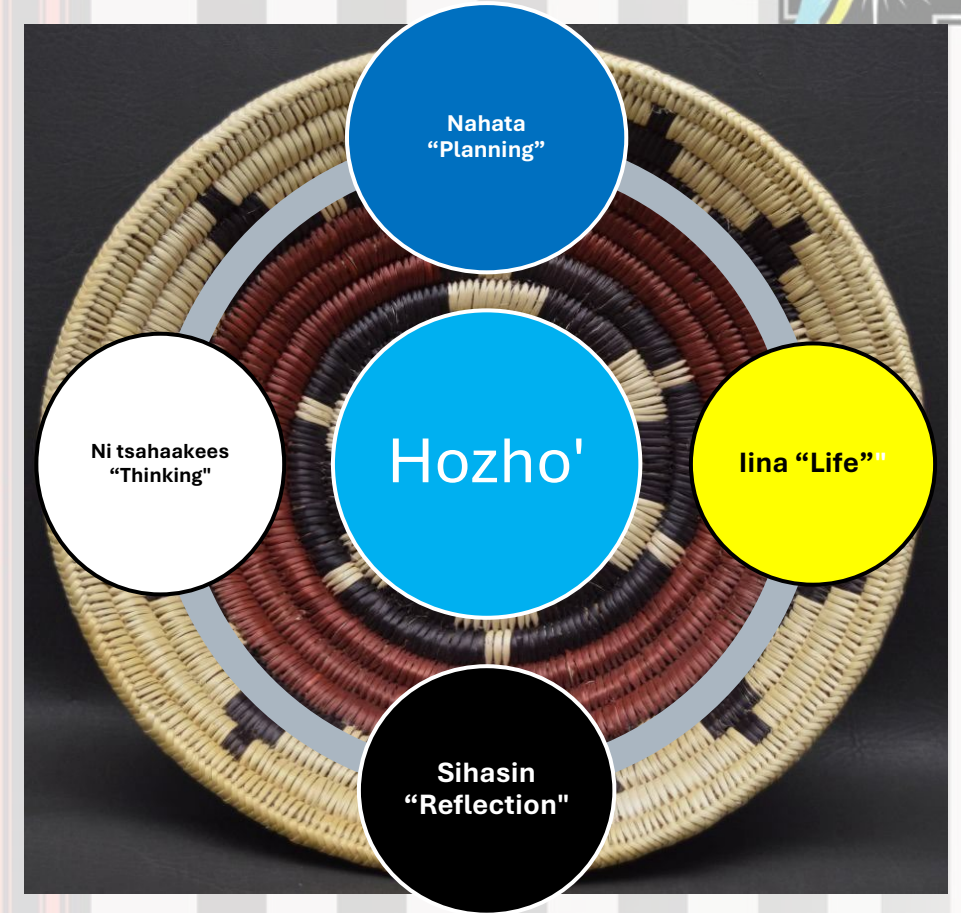
Provide information on the SMH's Office of Indigenous Medicine Program (OIM)

Understand the Patient Referral Process for the OIM Program

Share the ceremonies / prayers included in the OIM Program

OIM Program Data

Discussion / Questions



TRADITIONAL HEALER AND LICENSE



- **Harrison Jim, Traditional Practitioner**
 - Licensed through the Diné Hataaʼii Association, Inc
- **Isiah Tsosie, Traditional Healing Assistant / Groundskeeper**
- Female Practitioner, vacant





OFFICE OF INDIGENOUS MEDICINE

- Under the Behavioral Health Department
- Reports to the BH Director, Dr. Laughter, MD
- New Program, started 2023
- Policies created; followed the best practices from Fort Defiance Hospital and Chinle Service Unit
- Offers specific healing/prayer services
- Other traditional healer certifications accepted: Azee Be naha gh'aah organization
- Ceremonial consultations and Traditional Counseling
- Patient room cleansing
- Smoke ceremony (traditional mountain smoke)
- Story Telling
- Talking circles
- Native American Church cedar burning and smudging
- Blessing prayer
- Pregnancy rite
- Department blessing
- Cultural orientation and education
- Medical interpretation



EXCLUDES MORE EXTENSIVE CEREMONIES



- Overnight ceremonies
- Traditional diagnosing
- Blackening ceremonies
- Services not included in the patient's treatment plan



PATIENT SELF REFERRAL

Register with
(ER, OPD, MTU, BHD, BHPP) -Referral made by Provider or a walk-in to OIM

Traditional Consult Appt. by BHD or Traditional Practitioner

OIM Contact Consult & Treatment plan

Schedule Ceremony with Instructions



Completion of Traditional Services; document in EHR

Ceremony Traditional Service Provided

COMPLETE

Additional recommended ceremony

Post Ceremony or recommend Traditional Counseling

HÓZHÓ NÁHÁSDLÍJ!
Walk in Beauty



PATIENT REFERRAL TO OIM

- Patients must register and be seen by a Sage Memorial Hospital Provider
 - Emergency Department
 - Outpatient Department
 - Medical/Telemetry Unit
 - Intensive Care Unit
 - Behavioral Health Department
- Behavioral Health OIM
 - Referral Form given to Patient
 - Patient contacts Behavioral Health Department to schedule appointment with Traditional Healer
 - Direct Referral from Provider to Behavioral Health Department
 - Sent by email or internal fax



INITIAL VISIT

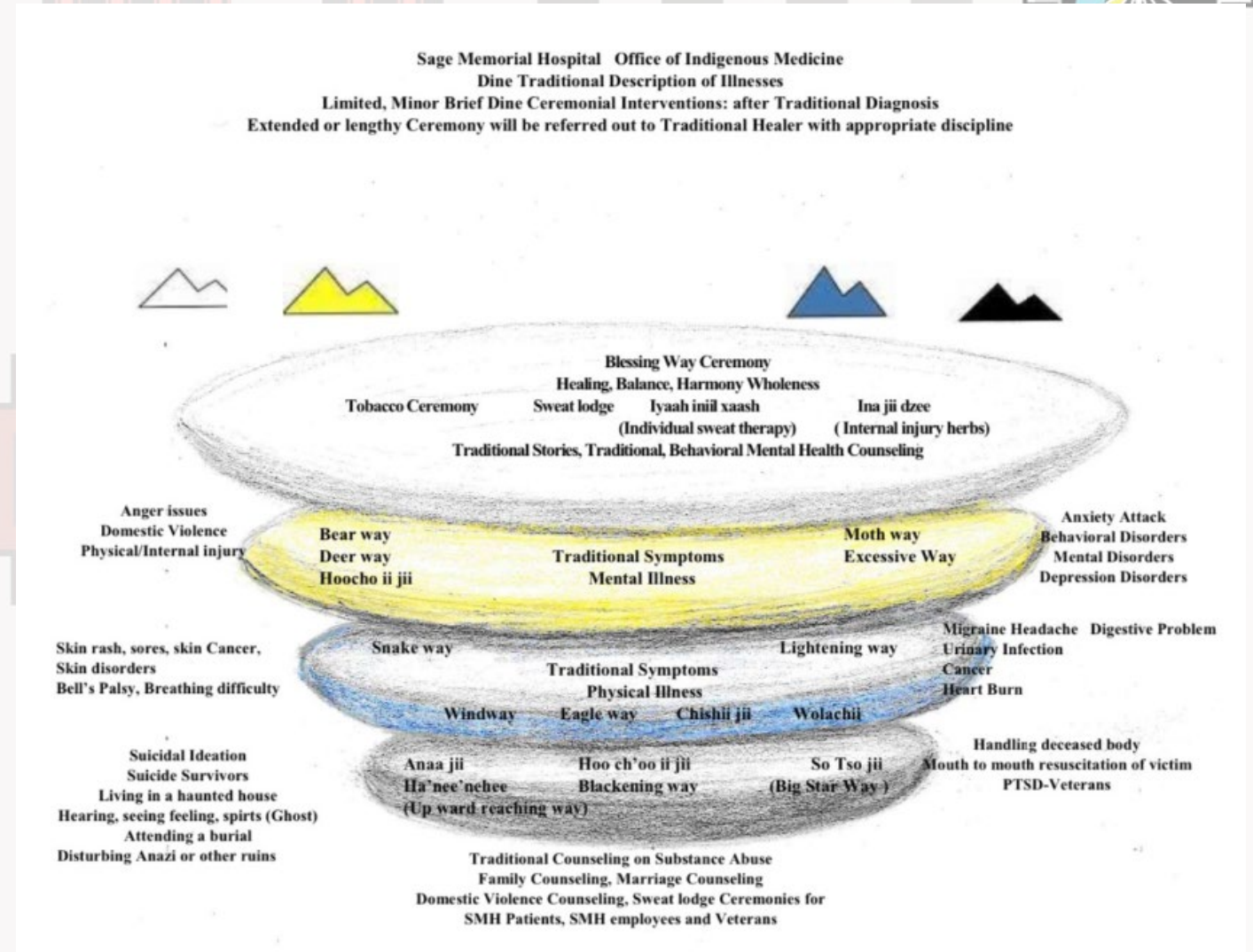
Introductions

Counseling/Discussion

Diagnosis

Treatment Plan

Documentation



SCHEDULE CEREMONY WITH INSTRUCTIONS



Scheduled by Traditional Practitioner

Indication of items needed

Planning of ceremony

- Time of Day
- Guest/Family Attending

Instructions/Expectations





CEREMONY (ON CAMPUS)

- Patients will be given directions to ceremony site
- Patients will be informed that they will have to arrive on time
- Patients who do not arrive within 15 minutes of scheduled ceremony will have their appointment cancelled until another appointment is made.
- Visit is documented in the EHR and signed off by Dr. Laughter, MD



ADDITIONAL CEREMONIES



Process	Prayer/Ceremony Type	Sessions	Time Frame
Diagnosis & Treatment Req.	Healing Prayer	1 Session	
Required Ceremony	Ex: Protection Prayer, Tobacco Ceremony, NAC Cedar Burning, etc.	1 Session – 2 Hrs or less	
Ceremony for Tx Plan	Sweatlodge Ceremony, Tobacco Ceremony, Cedar Burning	1 session Medicinal Herbs	
Traditional Counseling & Teachings	As Needed	As Needed	
Completion of Traditional Services	Hozho Nahas dlii		



Recommendations

Additional Ceremony

- Sometimes other ceremonies are required for continued healing and will be recommended if revealed during session.

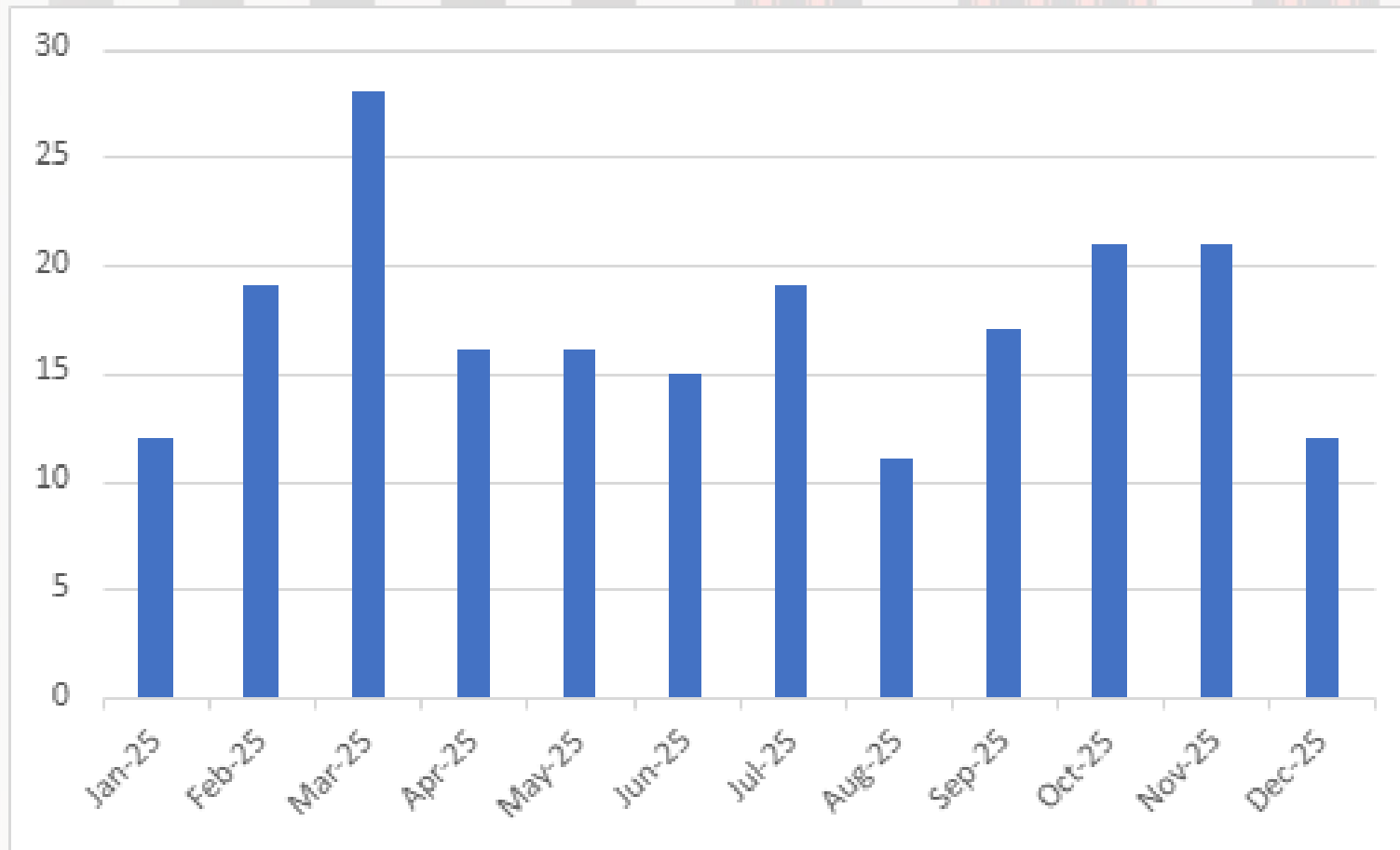
Traditional Counseling

- Sometimes continued counseling will be needed and beneficial for the patient and will be recommended.





OIM VISITS



- Visits are patients/relatives
- Admitted into the inpatient unit
- BH visits
- Departments may request for prayers (not included in data)



FUTURE PLANNING

- Mentoring program for traditional healers
- Expand services
 - Incorporate into the PCMH
- Completion of Hogan
- Incorporate the Navajo teaching in the care provided, “Sage Memorial Hospital Experience”



Ahe'hee

HOZHO NAHASDLII – “WALK IN BEAUTY”





Arizona's Traditional Healing Journey

Presented by

Kim Russell, Policy Advisor

Sage Memorial Hospital



PRESENTATION GOALS

- Describe Arizona's approach and framework to Traditional Healing Reimbursement
- Introduce AZ's Traditional Healing Model
 - California, New Mexico, and Oregon were also approved by CMS
- Describe the Evaluation Component\
- Share Next Steps





INTRODUCTION

- Medicaid reimbursement for TH went live October 1, 2025 .
- Each IHS/638 facility, in partnership with their local Tribal community, will individually define which services are most appropriate for Medicaid reimbursement.
- Traditional Healing practices are covered services in both inpatient and outpatient settings, and aid in care coordination and assist AHCCCS beneficiaries in achieving improved health outcomes.
- AHCCCS will reimburse for services provided by traditional healers who are employed by or contracted with an IHS/Tribal 638 facility.
- Traditional healers employed by or contracted with an UIO may provide reimbursable services through a care coordination agreement with an IHS/Tribal 638 facility.





INDEPENDENT EVALUATION

- AHCCCS has contracted with Health Services Advisory Group (HSAG) to conduct an independent evaluation of Arizona's current Demonstration. This will include the Traditional Healing Waiver.
- Evaluation consist of three main phases of work:
 - Phase I: Develop the Evaluation Design Plans.
 - Phase II: Conduct Interim Evaluations & Develop Interim Evaluation Reports.
 - Phase III: Conduct Summative Evaluations & Develop Summative Evaluation Report.





EVALUATION COMPONENTS

- Evaluate Traditional Health Care Practices (THCP) through an Indigenous framework to assess health from an Indigenous perspective.
- Avoid measuring THCP against Western medicine (PH and BH Metrics)
- Consider language barriers and interpretation requirements.
- Consider member and provider willingness to participating in focus groups and key informant interviews.
- Outline data security and privacy safeguards and coordinate with Tribal organizations to collect data.





DEVELOPING THE EVALUATION

- There are currently 3 hypothesis questions as proposed by HSAG, and AHCCCS will use evidence and tests in the future to check if these hypotheses are supported or not supported.
 1. Members will utilize THCP and increase the utilization of healthcare services.
 2. Traditional Practitioners will offer THCP to members.
 3. Members will experience culturally relevant care through THCP.
- January 29, 2026 - AHCCCS submitted the "final" draft of the Traditional Healing Evaluation Design to CMS on.





NEXT STEPS

- CMS will now review the evaluation submitted to ensure it aligns with regulatory expectations and inform the state if any revisions are needed.
- There is no timeline for CMS to complete this review.
- AHCCCS will inform the TH Workgroup and tribal stakeholders if any revisions are requested





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THANK YOU.

