

Health Care

### Grand Ronde Legal Services

Free legal service is offered by Oregon Legal Services (OLS) in cooperation with the Tribe to assist tribal members with legal issues such as divorce, wills, landlord disputes, consumer rights, employment issues, small business or contract advice.

OLS does not handle criminal cases, cases against the Grand Ronde Tribe, or cases against any Grand Ronde tribal member.

Inside Oregon only: 1-800-781-8500

Outside Oregon, call collect:

(503) 472-0242

Local Calls: 472-0242 or 472-9561

Collect calls may be received only during client hours:

Monday - Thursday from 9 a.m. to noon and 1:30 to 5 p.m.

### IMPORTANT NUMBERS

Main Office  
1-800-422-0232

Medical & Dental  
1-800-775-0095

Community Resources  
1-800-242-8196

Risk Management  
1-800-442-0346

Nanitch Sahallie  
1-800-552-0939

### 25 MILE RADIUS ENFORCED

Contract Health Services (CHS) would like to remind tribal members of some important IHS standards that are going to be enforced. Many tribal members now have a primary insurance since the tribe offered the new ODS plan. Most primary insurance plans require you to choose a primary care provider. According to IHS standards, if a tribal member resides within a 25 mile radius of an IHS medical clinic, in order for CHS to pay for co-payments and deductibles you must choose a primary care provider from that IHS clinic. The clinics involved in the Six County Service Area that you may reside within 25 miles of are the Chemawa Medical Clinic in Salem, and the Tribal Health Clinic in Grand Ronde. The providers in both of these clinics are primary care providers with ODS. If you choose to pick a primary care provider that is not in one of these clinics and you reside in the 25 mile radius of that clinic **YOU WILL BE RESPONSIBLE FOR ALL OF YOUR OWN CO-PAYS AND DEDUCTIBLES.** If you have a question as to whether or not you live within the 25 mile radius you may call CHS.

**The towns considered within the 25 MILE RADIUS OF CHEMAWA CLINIC: Salem, Keizer, Aumsville, Turner, Stayton, Woodburn, Brooks, and Silverton. Within the 25 MILE RADIUS OF THE GRAND RONDE TRIBAL CLINIC: Grand Ronde, Willamina, Sheridan, and Balston.**

Once you have chosen a primary care provider it is your responsibility to see that provider for all your medical services or get a referral from that provider to go to another provider. This includes emergency room visits, urgent care visits, and hospitalizations. If you don't get a referral from your primary care provider your bill will be denied from your primary insurance for not using your primary care provider. CHS will deny the bill for failure to use your alternate resource correctly.

**You still must follow the following guidelines:**

1. You must call in all appointments as soon as you know about them for pre-authorization, unless you are being seen at an IHS clinic. The confirmation number we give you is for that specific date of service to the provider you name. If you chose to go elsewhere or on another date, that confirmation number will not be good. If you do not call, the bill could be denied for no notification.
2. It will also be your responsibility to let your provider know if you have another insurance besides Contract Health so they can bill them first and CHS secondary. You need to make sure that the provider you choose accepts your insurance.
3. The same timeline is still in effect that all appointments must be called in as soon as you know about them, preferably in advance. All emergency room visits and hospital admits must be called in within 72 hours of the date of service.
4. If you are admitted into the hospital and have no other insurance other than CHS, then you will be required to apply for the Oregon Health Plan as an alternate resource. We will not be able to pay any of your bills for that hospital visit until we either receive a denial or acceptance from Oregon Health Plan. If you fail to comply with this rule in a timely manner your bills for this hospital stay and supporting bills will be denied.
5. All dental visits will be treated the same way as medical visits with this one exception: **we will only authorize one exam and cleaning every twelve months.** We will require a pretreatment plan from your dentist for all other dental work needed. We will return it to your dentist with the services that will be covered by CHS. You will still need to call in each date of service for authorization.
6. If you have received a letter from ODS asking for information about providers you have seen in the last six months, make sure you fill the form out and return it to ODS. They may not pay on your bills until they receive this information back. Your provider will not bill CHS until they receive an explanation of benefits from ODS.

If you have questions call Julie Little, Penny Deloe, or Teri Holsclaw at 1-800-775-0095 or 879-5211.

### Proposed amendments to Ordinances

*Tribal Council is posting these proposed amendments to the Election and Enrollment Ordinances which will become effective for the 1998 Tribal Council Election. These proposed amendments will be published in two issues before being approved/changed by Council. All comments regarding these ordinance changes should be sent to Francis Somday, Executive Officer, by September 1, 1997.*

#### ELECTION ORDINANCE

Add the following new subsection (c) (4):

**Voter Address List.** Each Year, the Enrollment Office shall prepare a list of the names and addresses of all tribal members who have a verified Voter Registration Form on file with the Tribal Enrollment Office as of that year's May General Council Meeting. The Enrollment Office shall delete from this list all tribal members who have on his or her voter registration card stated that he or she does not want his or her name and address given to Tribal Council candidates and, for tribal members registration prior to (the date this amendment is effective), all tribal member names and addresses for which the Enrollment Office has a statement signed by the tribal member requesting that his or her name and address not to be given to candidates. The remaining names and addresses on the list shall be referred to as the "Voter Address List." On the second Tuesday following the date the Board, the Enrollment Office shall mail a copy of the Voter Address List to all certified candidates for election.

**The next change to the Election Ordinance addresses the language that appears on the Voter Registration Form which tribal members must complete and sign before they can vote in tribal elections.**

Amend Clause (c) (2) (B) (1) as follows:

Replace the word "and" after the word "signature" in the fifth line with a "," and add the following at the end of this clause:

"and the following statement:

'Your name and address will be provided to all certified candidates for election to Tribal Council unless you check the box below.

No. I do not wish my name and address released to Tribal Council candidates."

**The resolution adopting this amendment requests that *Smoke Signals* print the previous statement on a form that can be clipped and returned to the Enrollment Office by voters who do not wish to have their name and address released to candidates.**

#### ENROLLMENT ORDINANCE

Delete the current subsection (c) (5) and replace with the following:

**Access to Records. Confidentiality:** The Tribe's Executive Officer, Administrative Officer, attorneys and legal staff, Enrollment Committee members and enrollment staff shall have access to enrollment records for official tribal business, including litigation and custody proceedings involving the Tribe. A tribal member or applicant for tribal membership (or the person who filed the application in the case of a minor or incompetent pursuant to subsection (d)(3) here of) may inspect his or her own enrollment record at the Enrollment Office during regular business hours. Except as thus provided, all enrollment records shall be confidential. Disclosure of enrollment records to someone than the persons specified or use of enrollment records in a manner other than that specified herein shall be grounds for termination of employment or cause for removal from Enrollment Committee.