

CDC/ATSDR Tribal Advisory Committee Members

Area Office	Delegate	Alternate
Alaska Area Term Expires: June 30, 2025	Alicia Andrew Chief and Councilwoman <i>Karluk IRA Tribal Council</i>	Joyce Jones Councilwoman <i>Native Village of Karluk</i>
Albuquerque Area Term Expires: June 30, 2025	Conrad Jacket Councilman <i>Ute Mountain Ute Tribe</i>	Yolandra Gomez, MD, MPH Pediatric Health Consultant <i>Jicarilla Apache Nation</i>
Bemidji Area Term Expires: August 31, 2025	Jennifer Webster Councilwoman <i>Oneida Nation</i>	Debra Danforth, RN, BSN Division Director <i>Oneida Nation</i>
Billings Area Term Expires: July 31, 2026	Jeffrey Berger Director of Disaster and Emergency Services <i>Ft Peck, Assiniboine and Sioux Tribes</i>	VACANT
California Area Term Expires:	VACANT	VACANT
Great Plains Area Term Expires: June 30, 2025	Mark Fox Chairman <i>Mandan, Hidatsa, & Arikara Nation</i>	Monica Mayer, MD Councilwoman <i>Mandan, Hidatsa, & Arikara Nation</i>
Nashville Area Term Expires: June 30, 2026	Brian Harris Chief <i>Catawba Nation</i>	VACANT
Navajo Area Term Expires: June 30, 2025	Buu Nygren, EdD President <i>The Navajo Nation</i>	Kim Russell Executive Director <i>Navajo Department of Health</i>
Oklahoma Area Term Expires: October 31, 2025	Bryan Warner, MEd (TAC Chair) Deputy Principal Chief <i>Cherokee Nation</i>	Lisa Pivec, MS Executive Director, Cherokee Nation Public Health <i>Cherokee Nation</i>

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Area Office	Delegate	Alternate
Phoenix Area Term Expires: June 30, 2025	Timothy L. Nuvangyaoma Chairman <i>Hopi Tribe</i>	Darren Vicenti, MD Director Hopi Health Dept <i>Hopi Tribe</i>
Portland Area Vacant	VACANT	VACANT
Tucson Area Term Expires: November 30, 2025	Delma M. Garcia Councilwoman <i>Tohono O'odham Nation Council</i>	Vivian Juan Saunders Councilwoman <i>Tohono O'odham Nation Council</i>
National At-Large Tribal Member Term Expires: October 31, 2025	Sharon Stanphill, MD Chief Health Officer <i>Cow Creek Band of Umpqua Tribe of Indians</i>	VACANT
National At-Large Tribal Member Term Expires: August 31, 2025	Connie Barker, BS (TAC Co-Chair) Tribal Legislator <i>Chickasaw Nation</i>	Jessica Imotichey, MPH Health Policy and Legislative Analyst <i>Chickasaw Nation</i>
National At-Large Tribal Member Term Expires: August 31, 2025	Herminia Frias, MPH Councilwoman <i>Pascua Yaqui Tribe</i>	VACANT
National At-Large Tribal Member Term Expires: June 30, 2025	Del Beaver, MS Second Chief <i>The Muscogee (Creek) Nation</i>	Abbi Lee, PhD, MPH Director of Public Health, Muscogee (Creek) Nation Department of Health <i>The Muscogee (Creek) Nation</i>
National At-Large Tribal Member Term Expires: November 20, 2025	Cary Fremin Councilwoman <i>Village of Dot Lake Council</i>	VACANT

CDC/ATSDR Tribal Advisory Committee Charter

CENTERS FOR DISEASE CONTROL AND PREVENTION AND AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

TRIBAL ADVISORY COMMITTEE CHARTER

Revised November 6, 2023

BACKGROUND

The United States has a unique legal and political relationship with Tribal governments, established through and confirmed by the Constitution of the United States, treaties, statutes, executive orders, and judicial decisions. In recognition of that special relationship, pursuant to Executive Order 13175 of November 6, 2000, executive departments and agencies are charged with engaging in regular and meaningful consultation and collaboration with Tribal officials in the development of federal policies that have Tribal implications and are responsible for strengthening the government-to-government relationship between the United States and Tribal Nations. A presidential memorandum was issued on January 26, 2021, "Memorandum on Tribal Consultation and Strengthening Nation-to-Nation Relationships." In this memo the President expressed renewed priorities to support robust Tribal Consultations and strengthen the government-to-government relationships that exist between Tribes and the United States Government.

This charter outlines the duties and responsibilities of the Centers for Disease Control (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR) Tribal Advisory Committee (TAC) to serve the purpose of seeking consensus, exchange views, share information, provide advice and/or recommendations; or facilitate any other interaction related to intergovernmental responsibilities or administration of CDC programs, including those that arise explicitly or implicitly under statute, regulation or Executive Order.

PURPOSE

The purpose of the CDC/ATSDR¹ TAC is to provide a forum wherein elected officers of Tribal governments (or their designated employees or national association with authority to act on their behalf) and CDC/ATSDR leaders exchange views, information, or advice relating to the management or implementation of federal programs established pursuant to statute, and that explicitly or inherently share intergovernmental responsibilities or administration. The content of the meetings consists of exchanges of views, information, or advice on CDC/ATSDR program, policies, and priorities that affect American Indian/Alaska Native (AI/AN) populations, as well as the implementation of intergovernmental responsibilities or administration, including those that arise from statute, regulation, or executive order.

¹ Note: References to CDC also apply to the Agency for Toxic Substances and Disease Registry (ATSDR). The CDC director also serves as the ATSDR administrator.

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The TAC will support, and not supplant, any other government-to-government consultation activities that CDC/ATSDR undertakes. In addition to assisting CDC/ATSDR in the planning and coordination of Tribal consultation sessions, the TAC will advise CDC/ATSDR regarding the Tribal consultation process and will help ensure that CDC/ATSDR activities or policies that impact Tribal nations are brought to the attention of all Tribal leaders.

AUTHORITY

Pursuant to Presidential Executive Order No. 13175, November 6, 2000, and the Presidential memoranda of September 23, 2004, and November 5, 2009, the United States Department of Health and Human Services (HHS) adopted a Tribal Consultation Policy that applies to all HHS operating and staff divisions, including CDC and ATSDR. The HHS Tribal Consultation Policy directs operating divisions to establish a process to ensure accountable, meaningful, and timely input by Tribal officials in the development of policies that have Tribal implications.

Consistent with the HHS Tribal Consultation Policy, CDC and ATSDR established the CDC/ATSDR TAC as one method of enhancing communications with Tribal governments. The TAC Charter complies with an exemption within the “Unfunded Mandates Reform Act” or UMRA (P.L. 104-4) to the Federal Advisory Committee Act (FACA) that promotes the free communication between the Federal government and Tribal governments. In accordance with this exemption, the TAC facilitates the exchange of views, information, or advice between Federal officials and elected officers of Tribal governments (or their designated employees or national association with authority to act on their behalf) acting in their official capacities.

FUNCTION

The TAC serves a vital role in guiding CDC/ATSDR’s engagement with federally-recognized Tribal governments. Per the UMRA exemption policy and in recognition of Tribal sovereignty and the government-to-government relationship between Federally recognized Tribal governments and the Federal government, TAC responsibilities are to exchange views, share information, provide advice and/or recommendations; or facilitate any other interaction relating to the management or implementation of intergovernmental responsibilities or administration, including those arising from federal statute, regulation, or Executive Order.

In addition, specific functions of the TAC may include but are not limited to:

1. Identify evolving issues and barriers to access, coverage, and delivery of services to AI/AN populations related to CDC/ATSDR programs
2. Propose clarifications, recommendations, and solutions to address issues raised at tribal, regional, and national levels

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3. Serve as a forum for tribes and CDC/ATSDR to discuss these issues and proposals for changes to CDC/ATSDR regulations, policies, and procedures
4. Identify priorities and provide advice on appropriate strategies for tribal consultation on issues at the tribal, regional, and/or national levels
5. Ensure that pertinent issues are brought to the attention of Tribal Governments in a timely manner, so that timely Tribal feedback can be obtained.

COMMITTEE COMPOSITION

The TAC will include only elected officers of Tribal governments acting in their official capacities or their designated employees with authority to act on their behalf.

The TAC will consist of 17 members (also known as delegates):

- Twelve of these positions will be filled by one delegate from each of the 12 Indian Health Service (IHS) areas. The IHS areas are Alaska, Albuquerque, Bemidji, Billings, California, Great Plains, Nashville, Navajo, Oklahoma, Phoenix, Portland, and Tucson.
- Five of these positions will be National At-Large Tribal Member (NALM) positions. These positions were created to facilitate broader coverage of regional and national Tribal perspectives and views on CDC/ATSDR issues and programs.

Each TAC delegate will have only one (1) designated TAC alternate, who may represent the TAC delegate in TAC meetings and other TAC activities in the event the TAC delegate is unable to attend. A designated TAC alternate must be qualified to represent the same Area as the TAC delegate but does not have to be from the same Tribe as the TAC delegate.

TAC Delegate

Each TAC Delegate should be an elected officer of a Tribal government or designated representative acting in his or her official capacity. All NALM members must either be elected Tribal officials, acting in their capacity as elected officials of their Tribe, or be designated by an elected Tribal official, in that official's elected capacity, with authority to act on behalf of the Tribal official. The delegate must be qualified to represent the views of their Tribal government and others in the respective area from which he or she was nominated.

Employees of an elected officer of a Tribal government or national associations who have authority to act on that officer's behalf, and who are designated to do so in writing (i.e., a designated representative), may be nominated as a TAC delegate and if chosen to participate on the TAC in lieu of the elected officer. A designated representative should have authority to speak for and bind the Tribal government he or she is representing in the same manner that the Tribal official would.

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If a TAC Delegate cannot attend a TAC meeting, the delegate will notify, by email, the Director of the Office of Tribal Affairs and Strategic Alliances (OTASA) within CDC's National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce. OTASA will then notify the alternate, prior to the meeting, to participate on the TAC delegate's behalf.

TAC Alternate

The TAC Alternate should be an elected officer of a Tribal government or designated representative, acting in his or her official capacity. An area alternate must be qualified to represent the views of their Tribal government and others in the respective area from which he or she was nominated. In the event the alternate will be participating on behalf of the delegate, the alternate will be given full voting rights. The alternate may attend all TAC meetings and activities but cannot participate actively unless the seat is ceded by the primary TAC Delegate.

When there is a permanent vacancy in the corresponding delegate's position (due to removal or for other reasons), the CDC Designated Federal Official (DFO) will notify the alternate and Page 4 of 9 request that the alternate perform the duties of the TAC delegate to the extent the alternate would be eligible to serve on the TAC (e.g., an alternate could step up to serve as TAC delegate, but if isn't a tribal elected official cannot serve as TAC Chair or Co-Chair). The designated alternate will serve the remainder of the unexpired term of the original delegate and if nominated again may serve successive, consecutive terms.

Interim Representative

If both the delegate and alternate are not available for a meeting or meetings, the delegate may designate an "interim representative," who is an elected officer of a Tribal government or designated representative, acting in his or her official capacity, to serve in his or her place. The interim representative will have the same voting rights as the delegate. The delegate must designate the interim representative in writing, via signed letter on official letterhead, to the OTASA Director prior to the TAC meeting.

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SELECTION PROCESS

The Public Health Infrastructure Center Director serves as the Designated Federal Official (DFO) for the TAC and the OTASA Director serves as the Executive Secretary for the TAC. The Executive Secretary will announce TAC vacancies and solicit nominations from federally recognized AI/AN Tribes. Only federally recognized AI/AN Tribes may nominate TAC delegates and their alternates. Submissions must include signed nomination letters on official Tribal Nation letterhead with the following information and be sent to the Executive Secretary by the requested deadline:

1. Name of the nominee
2. Nominee's official title
3. Name of the Tribal Nation
4. Date of nominee's election to official Tribal position and term length
5. Nominee's contact information (mailing address, phone, fax, and email)
6. Name of elected officer submitting nomination
7. Official title of elected officer submitting nomination
8. Contact information for elected officer submitting nomination and/or administrative office for the Tribal government
9. Confirmation that the nominee:
 - a. Has the authority to act on behalf of the Tribal Nations
 - b. Is qualified to represent the views of the Tribal Nations in the area from which he or she is nominated

A Tribal resolution and similar documents officially recognized by the tribe, which unequivocally identify the nominee as an elected official and are endorsed by the highest-level tribal council and tribal secretary, may also be utilized as valid documentation for the nomination process.

The DFO and Executive Secretary are also responsible for selecting the TAC delegates based on the submitted letter(s) and notifying the seated TAC delegates of the selections in writing, electronically or otherwise. Nominations are considered for selection in the priority order listed below:

1. Tribal President/Chairperson/Governor
2. Tribal Vice-President/Vice-Chairperson/Lt. Governor
3. Elected or Appointed Tribal Official
4. Designated Tribal Official

In the event there is more than one nomination for a delegate seat, letters of support from Tribal governments, regional, and national Tribal organizations will be taken into consideration in the priority order listed above.

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MEETINGS

Frequency

CDC/ATSDR seeks to convene no less than two TAC meetings each fiscal year, subject to availability of funds. CDC/ATSDR expects to host one in-person meeting in Atlanta, Georgia, and a Tribal Nation will host one in-person meeting in Indian Country, in accordance with HHS and CDC/ATSDR meeting policies. In-person meetings are preferred, with virtual participation allowed. Meetings may be held fully virtually depending on circumstances and CDC/ATSDR and TAC preferences.

These bi-annual meetings may be held in conjunction with formal CDC/ATSDR Tribal consultation sessions and may be funded in whole or in part by CDC/ATSDR. Additional meetings may be scheduled depending on need and availability of funds.

Bi-Annual Meeting Planning

The TAC DFO (or his or her delegate), TAC Chair, and Co-Chair will co-lead planning of biannual TAC meetings (and other TAC meetings as agreed upon). This includes collaborative planning and input on the purpose, date, time, location, format (e.g., virtual or in-person, or both options), and agenda/content of each meeting.

The CDC Director/ATSDR Administrator (or alternate in leadership position with equivalent decision-making authority in the CDC Office of the Director) and senior leadership from CDC/ATSDR centers, institute, and offices (CIOs) must be invited to participate in outcome-oriented dialogue during TAC meetings.

Bi-Annual Meeting Procedures

Under certain circumstances, the TAC member, alternate, or both for a Tribe or NALM may participate in a meeting or conference call, in-person or virtually. When the TAC member is the elected officer of a Tribal government, and the alternate is a designated employee or national association with authority to act on behalf of the elected officer, and they are present for the same meeting or call, the TAC member may designate, in writing, the alternate to participate on the TAC member's behalf at the meeting or call, and the TAC member will yield his or her participation to the alternate until the TAC member wishes to resume participation at the meeting or call. When the TAC member and alternate are both elected Tribal government officers or have both been designated by an elected officer of a Tribal government to act on behalf of the officer, they may both participate in the same meeting or call. In the instance that both the primary and alternate attend the meeting, CDC will only provide funding for the primary representative.

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If both the primary and the alternate for a particular Area or NALM position are participating in the same meeting or call, only one will be counted in terms of meeting quorum or voting. The primary and alternate may agree which of them will express a view for consensus or vote on particular issues. If they do not agree, then the primary TAC member's view or vote will be counted.

Pursuant to Section 204 (b) of the Unfunded Mandates Reform Act (2 U.S.C. §1534 (b)), members of the public may be present at committee meetings (i.e., in the audience as observers), but they may not participate in open discussion and there is no "open mic" time during the meeting portion. authorize.

TAC LEADERSHIP

Chair

A Chair is selected by and from the TAC members for a one calendar-year term of service. The Chair will be an elected or appointed Tribal officer. The Chair may serve additional terms provided he or she remains a TAC member.

Co-Chair

The Co-Chair is selected by and from the TAC members for a one calendar-year term of service. The Co-Chair will be an elected or appointed Tribal officer. The Co-Chair may serve additional terms provided he or she remains a TAC member.

Designated Federal Official (DFO)

The DFO serves as the lead point of contact for the TAC. The DFO may delegate responsibilities for the administration and operational functions for the TAC to the Executive

Secretary. In addition, this individual:

1. Provides programmatic guidance, technical assistance, and administrative support
2. Selects key CDC/ATSDR leaders and staff to serve as resources to the TAC by providing leadership, technical assistance, and subject matter expertise
3. Monitors and tracks the total resources allocated annually to serve AI/AN populations through CDC/ATSDR programs and initiatives
4. Actively engages the TAC in the creation of the agenda for all in-person and virtual TAC meetings and conference calls

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Additionally, the DFO will be responsible for inviting and encouraging CDC/ATSDR Senior Leadership participation in each TAC meeting. Unless otherwise designated by the CDC Director/ATSDR Administrator, the DFO will be the Public Health Infrastructure Center Director.

Re-election

The TAC will hold elections annually, at which time the seated delegates (or their alternates) of the TAC will call for nominations for an election. TAC delegates (or their alternates) may reconfirm the Chair or Co-Chair or vote on a new Chair or Co-Chair.

TAC MEMBER PERIOD OF SERVICE

TAC members serve 2-year terms.

Vacancy

When a vacancy occurs on the TAC, the Executive Secretary will announce and solicit nominations for the vacant seat to tribal partners such as, but not limited to, federally recognized Tribal governments; Tribal, regional, or national organizations; AI/AN-serving organizations; and CDC/ATSDR's HHS partners (including the HHS Secretary's Tribal Advisory Committee and relevant HHS Operating Divisions and Staff Divisions).

When a vacancy occurs, the Executive Secretary notifies the Tribal Nations in the respective area (all Tribal Nations will be notified if a NALM position is vacant) and ask them to nominate a replacement. Elected Tribal officers must submit a signed nomination letter of a nominee, in writing and by the deadline provided by the Executive Secretary. In the event no nominations are received, the Executive Secretary shall seek a new appointee. The designated alternate may attend meetings until the vacancy is officially filled.

Removal

TAC members must make a good faith effort to attend all official meetings either in person or virtually. If a delegate or alternate does not participate in a meeting on three consecutive occasions, the DFO or Executive Secretary will send a letter to the Tribal Nation(s) in the respective area, thanking them for their service. The Executive Secretary will then announce the position as vacant and will start the selection process for a new member. CDC/ATSDR may also request removal if a delegate no longer meets the requirements for being a TAC delegate (e.g., loss of election or change in elected Tribal position).

Technical Advisor

Each TAC delegate is allowed to bring a technical advisor or advisors to each TAC meeting to assist in the performance of the delegate's duties and responsibilities as a TAC member. The advisor's role is limited to giving advice to the member, and in a non-disruptive manner in the form of private counsel to the member, either communicated discreetly and directly to the member, or away from the group meeting.

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Technical advisors are not members of the TAC and are not allowed to sit at the table or take part in the official dialogue during the meeting. Ideally, advisors have expertise in public health and/or experience and knowledge of CDC/ATSDR to fulfill their responsibility of advising TAC members with respect to CDC/ATSDR policies, programs, priorities, and other activities.

QUORUM

A quorum, which is a simple majority (9 of 17) of TAC members (delegates or their alternates or interim representatives), present in-person or virtually, will be necessary for formal decisions and actions to be made by the TAC. If both the delegate and alternate cannot attend a meeting, the designated interim representative may represent the area or NALM position and be counted toward a quorum. In the event the TAC is unable to establish a quorum for its meeting, then the TAC Chair or Co-Chair, at his or her discretion, can arrange for polling of members via conference call or any other manner. Informational sessions may occur in the absence of a quorum.

EXPENSES

Each TAC delegate (or alternate, if the delegate is unable to attend) who is not a Federal employee will have travel expenses paid/ reimbursed by CDC for up to two in-person TAC meetings per year in accordance with standard government travel regulations and CDC travel policy, and dependent upon availability of federal funds.

VOTING

The TAC will operate by consensus. When a consensus cannot be reached, the TAC will vote to resolve any differences. Each TAC delegate (or alternate or interim representative) will be allowed only one vote. If both the delegate and his or her alternate participate in the same meeting or call, only the delegate will be counted for a quorum and voting purposes.

REPORTS

The DFO will ensure that all TAC meeting minutes and initial CDC/ATSDR responses to recommendations made during the meeting are made available to CDC/ATSDR leadership and provided to the TAC within 90 days following the TAC meeting. Once approved, the meeting minutes and recommendations report will be posted on CDC's Tribal Support website within 90 days to ensure that the information is accessible to the public. All meeting materials will also be archived and accessible to TAC members.

The "TAC Rules of Order" covers current agreements on content and timelines for other types of communications from CDC/ATSDR to the TAC, such as pre-read TAC meeting and TAC conference call materials and sharing of CDC/ATSDR updates with the TAC.

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SUBCOMMITTEES

The TAC Chair and Co-Chair, in consultation with the DFO, may form subcommittees, composed of TAC delegates (or their alternates), as needed, to accomplish the functions of the TAC. To satisfy the UMRA exemption, the members of the subcommittee must be:

1. Elected Tribal leaders acting in their official capacities; or
2. Designated employees of an elected Tribal leaders with authority to act on their behalf;
or
3. The representative of a national association designated by elected Tribal leaders to act on their behalf.

Subcommittees must report directly to the full TAC and must not provide any advice or work products to a Federal officer or the CDC/ATSDR. The TAC can adopt and present such advice or work to a Federal officer or CDC/ATSDR.

TERMINATION DATE

This TAC Charter is in effect as long as the CDC/ATSDR Tribal Consultation Policy is in effect. The TAC Charter may be amended, as needed, upon approval by the TAC, and final approval by the DFO.

ACRONYMS

AI/AN	American Indian and/or Alaska Native
ATSDR	Agency for Toxic Substance and Disease Registry
CDC	Centers for Disease Control and Prevention
CIO	CDC Center, Institute, or Office
DFO	Designated Federal Official
FACA	Federal Advisory Committee Act
HHS	Department of Health and Human Services
NALM	National At-Large Tribal Member
OTASA	Office of Tribal Affairs and Strategic Alliances (CDC)
STAC	HHS Secretary's Tribal Advisory Committee
TAC	Tribal Advisory Committee
UMRA	Unfunded Mandates Reform Act (P.L. 104-4)

CDC/ATSDR Tribal Advisory Committee

Rules of Order

The purpose of the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) Tribal Advisory Committee (TAC) is to provide a forum wherein elected officers of Tribal governments (or their designated employees or national association with authority to act on their behalf) and CDC/ATSDR leaders exchange views, information, or advice relating to the management or implementation of federal programs established pursuant to statute, that explicitly or inherently share intergovernmental responsibilities or administration. The content of the meetings consists of exchanges of views, information, or advice on CDC/ATSDR program, policies, and priorities that affect American Indian/Alaska Native (AI/AN) populations, as well as the implementation of intergovernmental responsibilities or administration, including those that arise from statute, regulation, or executive order.

This document is a companion document to the CDC/ATSDR TAC Charter. It provides information to aid participants in understanding the roles, processes, and implementation of the TAC.

Operations by TAC Role

Role: TAC Delegate

Qualifications: Elected officers of Tribal governments acting in their official capacity (or their designated employees or national association with authority to act on the officer's behalf). Must be qualified to represent the views of the Tribal Nations in the respective area from which the delegate was nominated. If the delegate is a Tribes-At-Large Member of the TAC, must be able to represent regional and national Tribal perspectives and views on CDC/ATSDR issues and programs.

Who Can Nominate: Federally recognized tribes

Term of Service: 2 years, as long as continues to meet qualifications

Can Count Towards Quorum: Yes

Can Vote: Yes

Can Speak at Formal TAC Meetings (e.g., Biannual Meetings): Yes

Service on TAC Subcommittees: Yes, as full participant

Role: TAC Alternate

Qualifications: Same for TAC Delegate

Who Can Nominate: TAC Delegate

Term of Service: Serves at the discretion of the TAC Delegate, as long as continues to meet qualifications. If the delegate is unable to serve the remainder of his/her term, then the alternate can serve the remainder of the delegate's term.

Can Count Towards Quorum: Only if delegate is absent

Can Vote: Only if delegate is absent or cedes his/her seat to the alternate for the vote. Only one vote (either the delegate or alternate) will count.

Can Speak at Formal TAC Meetings (e.g., Biannual Meetings): Only if delegate is absent or cedes his/her seat to the alternate to speak

Service on TAC Subcommittees: All tribal leaders on a subcommittee can participate, including TAC alternates. Any product or recommendations will be presented to the full TAC by the subcommittee chair. The TAC and delegates will then determine next steps, including putting forth to CDC.

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Rules of Order

Role: Interim Representative

Qualifications: Elected officer of a Tribal government or designated representative, acting in his or her official capacity, to serve in his or her area delegate's place

Who Can Nominate: TAC Delegate designates in writing, on Tribal letterhead and submits to CDC

Term of Service: As designated by the TAC delegate, as long as continues to meet qualifications. If the delegate and alternate both cannot continue and their positions are vacant, then the interim representative can serve in their place until a new delegate can be nominated and chosen.

Can Count Towards Quorum: Only if delegate and alternate are absent and is officially representing the delegate for this purpose

Can Vote: Only if delegate and alternate are absent and is officially representing the delegate for this purpose

Can Speak at Formal TAC Meetings (e.g., Biannual Meetings): Only if delegate and alternate are absent and is officially representing the delegate for this purpose

Service on TAC Subcommittees: Only if delegate and alternate are absent and is officially representing the delegate for this purpose

Role: Technical Advisor

Qualifications: Chosen by each TAC delegate to assist in his/her TAC duties. Ideally, have expertise in public health and/or experience and knowledge of CDC/ATSDR

Who Can Nominate: TAC Delegates choose their own Technical Advisor(s). Optional but encouraged.

Term of Service: At discretion of TAC delegate

Can Count Towards Quorum: No

Can Vote: No

Can Speak at Formal TAC Meetings (e.g., Biannual Meetings): Only if the delegate (or his/her alternate in the delegate's absence) has designated the Technical Advisor to speak on his/her behalf at the meeting and has temporarily ceded his/her seat to the Technical Advisor

Service on TAC Subcommittees: Cannot be members of the TAC subcommittee; however, can attend subcommittee meetings to provide assistance to their participating delegates/alternates/interim representatives. They can also speak on behalf of a delegate, alternate, or interim representative participating in the meeting, as authorized by those official participants. The Technical Advisor will have no decision-making role on the subcommittee.

The Technical Advisor will not hold a decision-making role within the subcommittee, and as a result, will not be eligible for travel support to attend in-person meetings.

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Rules of Order

Role:TAC Chair

Qualifications: Must be a delegate who is an elected or appointed Tribal officer

Who Can Nominate: TAC delegates (or their alternates or interim representatives) nominate and vote to choose

Term of Service: One (1) calendar year, may serve additional terms if chosen by the TAC

Can Count Towards Quorum: Yes

Can Vote: Same as delegate

Can Speak at Formal TAC Meetings

(e.g., Biannual Meetings): Same as delegate

Service on TAC Subcommittees: Yes, as full participant

Role:TAC Co-Chair

Qualifications: Must be a delegate who is an elected or appointed Tribal officer

Who Can Nominate: TAC delegates (or their alternates or interim representatives) nominate and vote to choose

Term of Service: One (1) calendar year, may serve additional terms if chosen by the TAC

Can Count Towards Quorum: Yes

Can Vote: Same as delegate

Can Speak at Formal TAC Meetings

(e.g., Biannual Meetings): Same as delegate

Service on TAC Subcommittees: Yes, as full participant

TAC Member Activities

TAC member activities include but are not limited to the following:

- Participate in TAC member orientation
- In collaboration with CDC, plan and implement TAC meetings
- Identify evolving issues and challenges and delivery of services to the AI/AN populations related to CDC/ATSDR programs
- Propose clarifications, recommendations, and solutions to address issues raised at tribal, regional, and national levels
- Serve as a forum for tribes and CDC/ATSDR to discuss these issues and proposals for changes to CDC/ATSDR regulations, policies, and procedures
- Identify priorities and provide advice on appropriate strategies for tribal consultation on issues at the tribal, regional, and/or national levels
- Communicate with tribes in the TAC member's area to share information on CDC/ATSDR activities, and to gather Tribal feedback and perspective on pertinent issues
- Assist in communicating calls for nomination for TAC membership and encourage eligible nominees to seek nomination.
- Identify and receive assistance from a Technical Advisor or Advisors in conducting TAC activities and duties, if desired
- Serve on a TAC subcommittee(s) to work on specific issues, as desired
- Provide input and approval on updates to the CDC/ATSDR TAC Charter, CDC/ATSDR TAC Rules of Order, and the CDC/ATSDR Tribal Consultation Policy
- Provide input on other CDC product, program, or service planning and implementation, upon agreement by the TAC to do so
- Provide CDC with feedback on operations and implementation of the TAC

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Rules of Order

CDC Roles and Responsibilities

Role: TAC Designated Federal Official (DFO)

Who: Determined by CDC

Responsibilities: Serves as the lead point of contact for the TAC. Is responsible for TAC administration and operational functions, which may be delegated to the Executive Secretary. Invites and encourages CDC Senior leaders to attend and participate in TAC meetings. Provides programmatic guidance, technical assistance, and administrative support to the TAC.

Selects key CDC/ATSDR leaders and staff to serve as resources to the TAC by providing leadership, technical assistance, and subject matter expertise. Ensures that total resources allocated annually to serve AI/AN populations through CDC/ATSDR programs and initiatives are tracked and reported. Actively engages the TAC in the creation of the agenda for all in-person and virtual TAC meetings and conference calls.

Role: CDC Senior Leaders

Who: Includes but not limited to CDC Director/ATSDR Administrator; CDC Principal Deputy Director; Directors of CDC's centers, institute, and offices (CIOs); and leaders at other levels of the agency.

Responsibilities: Attend and participate in Bi-Annual TAC meetings and in additional meetings as needed. May bring other leaders or staff to assist them in TAC discussions.

If the CDC Director/ATSDR Administrator is not able to attend, he or she will delegate another CDC senior leader, such as the CDC Principal Deputy Director, to represent him or her.

Role: TAC Executive Secretary

Who: Director of the Office of Tribal Affairs and Strategic Alliances (OTASA) or designee

Role: TAC Operations, Planning, and Implementation Expertise and Support

Who: OTASA staff

Role: TAC Public Health Issue Technical Assistance

Who: CDC subject matter expert (SMEs) as needed

Recruitment for Vacant Positions

- The recruitment period for vacant positions will span between 4-6 weeks, adhering to best practices for a fair and open nomination process. During this time, all nominations will be thoroughly reviewed to select the most qualified candidate to serve on the TAC.

CDC/ATSDR Tribal Advisory Committee

Rules of Order

General Protocol for the Bi-Annual TAC Meeting

- The TAC and CDC will plan the meeting together.
- TAC members and CDC Senior Leaders will make every attempt to attend and participate.
- TAC members will notify CDC as soon as possible if unable to attend and the DFO or Executive Secretary will contact the TAC alternate to request participation on the delegate's behalf. If the alternate is not available, the DFO or Executive Secretary and the TAC delegate will work together to provide for an interim representative.
- See Table 1 for a summary of TAC member qualifications and roles, including speaking and voting roles.
- See Table 2 for a summary of CDC participants and roles.
- The TAC Chair and TAC Co-Chair, who chair the meeting, will strive as much as possible to acknowledge in the following order TAC members who wish to speak during the meeting:
 - Tribal President/Chairperson/Governor
 - Tribal Vice-President/Vice-Chairperson/Lt. Governor
 - Elected or Appointed Tribal Official
 - Designated Tribal Official.
- Although the TAC meeting is open to the public, only the TAC delegates/alternates or the federal representatives can participate in the actual meeting. Other attendees must not engage in communication during the meeting with the TAC unless the attendee is made an official alternate designee in writing.

Quorum and Voting

- Total voting capacity of TAC Delegates is 17. Quorum is a majority, which is at least 9 out of the 17. Voting can be performed in-person or virtually.
- Votes are taken for nomination and election of TAC co-chairs, to approve updates to the TAC Charter and CDC/ATSDR Tribal Consultation Policy, and for agreeing on a Tribal host for the TAC biannual meeting. Other votes are taken at the discretion of the TAC. Note that informational sessions may occur in the absence of a quorum.
 - The TAC Delegates may vote.
 - Should a delegate be absent, his or her alternate shall vote.
 - Should a delegate and alternate be absent, and an interim representative has been appointed by the delegate, the interim representative shall vote.
 - Technical advisors may not vote.

CDC/ATSDR Tribal Advisory Committee

Rules of Order

Reporting

CDC reports to the TAC include but may not be limited to the following:

TAC Bi-annual Meetings

- CDC will produce meeting minutes and provide them to the TAC within 90 days after the TAC meeting has taken place. CDC will also post the minutes on the Tribal Support website. All meeting materials will also be archived and accessible to TAC members through an FTP site or other electronic means.
- CDC will produce a report on CDC's response to the recommendations from each TAC meeting and provide them to the TAC within 90 days after the TAC meeting. Before the next TAC, CDC and the TAC will discuss the report during a conference call/informal meeting to ensure mutual understanding. CDC will also post the report on the Tribal Support website.

Tribal Consultations

- CDC will provide the TAC with the summary reports related to CDC or ATSDR tribal consultations within 45 days after the tribal consultation comment period ends. CDC will then provide the final report related to CDC or ATSDR tribal consultations according to the same reporting timeframe as required for the consultations themselves which is within 90 days after the end of the tribal consultation period.

Secretary's Tribal Advisory Committee Reports

- CDC will provide the TAC with copies of its updates to the STAC, which is usually quarterly, but timelines vary. In addition, CDC will share its annual report to the STAC on CDC support for Tribes. CDC will provide copies within 5 working days after the respective STAC meeting.

Other Updates: CDC also will provide the TAC with updates on CDC/ATSDR activities through email and in conference calls between TAC meetings.

CDC will also provide the TAC with quarterly written reports on initiatives, results of tribal consultations, budgets, and activities impacting Tribes, including emergent topics, across each of the CIOs. All written reports should be distributed to the TAC at least 30 days in advance of any scheduled meetings.

CDC/ATSDR TAC Member Biographies



Oklahoma Area | Bryan Warner | Deputy Principal Chief | Cherokee Nation | TAC Chair

Bryan Warner is the Deputy Principal Chief of the Cherokee Nation. Prior to June 2019, he has served on the Cherokee Nation Tribal Council for District 6, a position he held since 2015. Mr. Warner holds a Bachelor of Science degree in biology from Northeastern State University and a Master of Education degree from East Central University. He is employed at Carl Albert State College and has served as a full-time science instructor and is now Sallisaw Campus Director. Mr. Warner's civic and volunteer experience includes time served as Ward 3 City Commission for the City of Sallisaw, leading local youth in church, as well as coaching youth league baseball and football. He also works closely with the Sallisaw MainStreet Organization, is a member of Sallisaw Lions Club, and is on the board of directors for Sallisaw Youth League and the Sallisaw Youth and Recreation Commission.



National At-Large | Connie Barker | Chickasaw Nation | Tribal Legislator | TAC Co-Chair

Connie Barker is a Tribal Legislator for the Chickasaw Nation. She has served the Pickens District since 2008 and has previously held both Secretary and Chairperson positions. Mrs. Barker is a member of the Legislative, Human Resources, Education, Health, and Tribal Historical Preservation committees, as well as the Tribal Co-Chair for the Tribal Leaders Diabetes Committee, a national committee dedicated to the treatment and prevention of diabetes in Indian Country. She currently serves as Health Committee Chair and serves on multiple other committees. Mrs. Barker is a graduate of Murray State College and an Honor Graduate of the first Leadership Love County Class of 2004.



Albuquerque Area | Conrad Jacket | Councilman | Ute Mountain Ute Tribe

My name is Conrad Jacket. I'm a Councilman for the Ute Mountain Ute Tribe. I graduated from Montezuma Cortez High School, went to Pueblo Community College, joined the US Army, served in Iraq, got out and worked for my Tribe since.

CDC/ATSDR TAC Member Biographies



Albuquerque Area | Yolandra Gomez, MD, MPH | Jicarilla Apache Nation

Dr. Yolandra Gomez, MD, MPH, is from Dulce, New Mexico, and a member of the Jicarilla Apache Nation. She graduated from Princeton in 1988 with a degree in Public Policy and earned a Master of Public Health in Health Policy and Administration from the University of California, Berkeley, in 1991. She returned to New Mexico and worked for the Department of Health, Chronic Disease Prevention Program, where she advocated for public health strategies at the state level for rural and tribal communities. With the goal of providing culturally competent healthcare for Native American children and other underserved populations, she obtained her medical degree and completed a pediatric residency from the University of New Mexico (UNM) School of Medicine in 2007.

Dr Gomez was a pediatrician in private practice in the Albuquerque area for over 16 years, seeing a variety of patients and families from many backgrounds in an outpatient setting. During this time, she also worked part-time at the Pueblo of Jemez Clinic, specializing in children with special needs. There she initiated a school-based collaboration to support Native American children with learning and behavior challenges. Recently, she returned home to serve the Jicarilla Apache Nation as a Pediatric Health Consultant, where she works to create medical homes for children who live on the reservation, assists in data collection and research with outside entities, and acts as an adviser in public health policy and clinical medicine. She collaborates with local, state, and national early education organizations and providers, and recently received federal funding for the Jicarilla Tribal Maternal, Infant, and Early Childhood Home Visiting Program, for which she will be Project Director.

She continues to teach medical students as an Assistant Professor at the UNM School of Medicine primarily in rural primary care medicine and is a mentor to high school and college Native American students interested in the field of medicine. Dr. Gomez founded and was leader of the first Native Alumni of Princeton group affiliated with the university in 2018 and was recently elected as the first Native American woman to the Princeton Board of Trustees in 2022.

CDC/ATSDR TAC Member Biographies



Alaska Area | Alicia L. Andrew | Karluk IRA Tribal Council, Native Village of Karluk President

Alicia Andrew is the Tribal Chief of the Native Village of Karluk/Karluk ITA Tribal Council in Karluk, Alaska. She has been serving her community since 1990.

Karluk IRA Tribal Council administers the Bureau of Indian Affairs programs locally, including the Roads Programs. Additionally, President Andrew made it possible for Karluk to contract directly with the Indian Health Service for local health services. President Andrew is the Alaska Representative on the Alaska Native Health Board. The Karluk Tribal Council selected President Andrew as the member representing Karluk Tribal on the National Congress of American Indians and National American Indian Housing Council.



Bemidji Area | Jennifer Webster | Oneida Nation | Councilwoman

Jennifer “Jenny” Webster has been engaged in Oneida government for 33 years in various capacities. As an elected official she has served on the Oneida Judiciary for three consecutive terms as an Appellate Court Judicial Officer. The Judiciary serves to enhance and protect the self-government and sovereignty of the Oneida Tribe.

Councilwoman Webster is serving her third term as an elected official on the Oneida Business Committee. She hopes to strengthen Nation efforts to preserve the language, culture, and tribal identity. Her priorities include protection of tribal assets and assuring fiscal responsibility and accountability.

Jennifer also owns a business with her husband, Don, for the past 20 years. Jenny and Don have two sons, Marcus and Zach, and one daughter, Olivia. They have three grandchildren: Raliaha, Oliver, and Wesson.

Councilwoman Webster has a mission to protect, preserve, and exercise tribal sovereignty.

CDC/ATSDR TAC Member Biographies



Great Plains Area | Mark Fox | Chairman | Mandan, Hidatsa, & Arikara Nation

Mark N. Fox is the Chairman of the Three Affiliated Tribes, the Mandan, Hidatsa and Arikara Nation (MHA Nation). He began his public service in 1985 by serving in the United States Marine Corps. After earning his law degree in 1993, he worked for the Tribal Legal Department and later began serving as the delegate for the North East Segment - Parshall/Lucky Mound on the Tribal Business Council. He served two terms (1994-2002) on the Tribal Business Council as Treasurer and Vice-Chairman. Opting to serve the MHA Nation in an administrative capacity, he worked as the Administrator for the Gerald Tex Fox Justice Center, before serving as the Tribal Gaming Director and later the Tribal Tax Director. In 2014, he sought to serve in the only at-large position on the Tribal Business Council and was elected Chairman. Chairman Fox was re-elected again in 2018, currently serving in his second term.

Chairman Fox is renowned for his experience and expertise in taxation, gaming, energy, and economic development. He currently serves on three federal agency advisory boards for the: Department of Energy, Department of the Interior, and the Environmental Protection Agency. In addition, he serves the National Congress of American Indians as Co-Chair of the Land and Natural Resources Committee and Chair of the Energy and Minerals Sub-Committee, and as the MHA Nation delegate to the United Tribes Technical College board.

He previously served as an advisory board member to the Internal Revenue Service and the National Indian Gaming Commission; four-terms as Treasurer for the National Indian Gaming Association; Chairman and Vice-Chairman of the Intertribal Monitoring Association on Trust Funds (ITMA); and Chairman of the Coalition of Large Tribes, among other boards and organizations.

A fierce proponent of tribal sovereignty, Chairman Fox, has dedicated his administration to developing and implementing long-term economic sustainability. Under his leadership, the MHA Nation has developed employment opportunities and increased wages to raise the standard of living for all tribal members; expanded and enhanced the tribal infrastructure and transparency in governmental affairs; and vastly raised tribal member's assistance in the areas of health, education, and addiction and recovery services.

Chairman Fox is a staunch supporter of youth and community development and has enjoyed competing in running, biking, and swimming endurance events over the years. He is also a diehard fan of the Dallas Cowboys.

CDC/ATSDR TAC Member Biographies



Great Plains Area | Dr. Monica Mayer | Council Member | Mandan, Hidatsa, & Arikara Nation

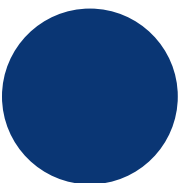
Councilwoman Monica Mayer, M.D. “Good Medicine” represents the residents of North Segment on the Tribal Business Council of the Mandan, Hidatsa, & Arikara Nation, the largest community on the Fort Berthold Indian Reservation in mid-west North Dakota. She’s presently serving in her sixth year and second term as Council Representative. She won in a historic landslide victory during her second campaign in September 2020.

Dr. Mayer has over 20 years of clinical healthcare experience all in the Great Plains Area of North Dakota, South Dakota, and Nebraska, working for direct patient care in clinical and an ER setting. She has administrative experience as Chief Medical Officer for critical access center, Belcourt Hospital, and the Great Plains Area (Deputy Acting). Most recently, she implemented a Home-Health program specific for North Segment, and is collaborating with MHA Chairman Mark Fox and The First Lady of ND Kathryn Burgum on drug and alcohol treatment and recovery initiatives.

Dr. Mayer is a lifelong resident of New Town and attended Edwin Loe Elementary and graduated from New Town High School in 1978. She obtained an Associate of Arts in Business Administration and holds a Bachelor’s of Science in Education. Councilwoman Mayer received her Doctorate of Medicine from the University Of North Dakota School Of Medicine and is a Family Practice Physician. She is also a Peacetime Veteran, honorably serving from 1984-1990 with the U.S. Army Reserves. She is also a member of the Hidatsa Prairie Chicken Clan.

Dr. Mayer presently Chairs the following Tribal Government Committees - the Health/ Human Resources Committee, the Education Committee, and the Judicial Committee. She additionally sits as a member to the Natural Resources Committee, the Energy Committee, the Cultural Committee, and the Economic Committee.

Dr. Mayer is dedicated to improving the overall Healthcare, Education, Law Enforcement, and Commerce of the North Segment Community by remaining actively involved with the Tribal Government. “I am committed to upholding a healthy, safe, and clean community.”



Billings Area | Jeffrey Berger | Director of Disaster and Emergency Services | Fort Peck, Assiniboine, and Sioux Tribes

CDC/ATSDR TAC Member Biographies



Nashville Area | Brian Harris | Chief | Catawba Nation

In July 2023, Brian Harris was nominated as Chief of the Catawba Nation. He has dedicated over twenty years of his life as a passionate advocate to the Catawba community. He has served as Chairman of the Iswa Housing Board, Administrative Officer of Indian Health Catawba Service Unit, and as a member on the Judicial Committee, Economic Development Committee, USET Housing and Veterans Committees, and the Cultural Preservation Board. He was recently voted as Chairman of the Council of the Chiefs in South Carolina by his peers.

Chief Harris has been married to his wife, Candi, for thirty years. They have five beautiful children and four grandchildren. He is most proud of becoming a father to his children and becoming Chief of Catawba Nation. He loves to have lunch with the Catawba seniors at the Senior Center and interact with the youth in the childcare programs.

Chief Harris is compassionate about supporting tribal services such as healthcare programs, education, elder care, economic development, and the housing needs of tribal citizens. He works relentlessly to improve the welfare of Catawba citizens by developing relationships and services for the community. He strives to revitalize the Catawba culture by sharing the rich traditions of the Catawba citizens. He enthusiastically supports Catawba drummers, dancers, potters, and craft artisans. His determination to build up the Nation and create opportunities guides his decisions and initiatives

CDC/ATSDR TAC Member Biographies



Navajo Area | Dr. Buu Nygren | President | The Navajo Nation

Elected the youngest Navajo Nation President in history at the age of 35, Dr. Buu Nygren served as the Chief Commercial Officer for the Navajo Engineering and Construction Authority (NECA) since 2019.

In 2018, President Nygren was selected as the vice presidential running mate for the Shirley-Nygren ticket in the Navajo Nation General Election. The prior eight years, from 2010 to 2018, the President was a national operations trainer and project manager at a multi-billion dollar construction company that built schools, senior living homes, and public safety facilities from Nevada to Florida.

A graduate of Red Mesa High School, the President obtained his Bachelor of Science in Construction Management from Arizona State University in 2012. He then pursued a Masters of Business Administration from Arizona State University and completed his Doctorate of Education in Organizational Change and Leadership from the University of Southern California in 2021.

The President's prior work experience includes being a construction laborer, carpenter, dishwasher, and, at the age of 14, custodian at his local high school. As a youth, he developed a strong work ethic as a small vendor offering baked goods and hand-made jewelry in and around the communities across the northern Navajo Nation.

In April, the President was recognized as one of the top 40 Native American Leaders Under 40 by the National Center for American Indian Enterprise Development (NCAIED). Dr. Nygren is married to former Arizona State Representative Jasmine Blackwater-Nygren, and together have a young daughter. Both proudly reside in Red Mesa, Arizona, about 35 miles from the Four Corners National Monument and 80 miles from Monument Valley, Utah.

CDC/ATSDR TAC Member Biographies



Navajo Area | Kim Russell | Executive Director | Navajo Department of Health

Kim Russell is of the Bitter Water People, born for the Tangle People. Her maternal grandfathers are of the Coyote Pass Clan and her paternal grandfathers are of the Bitter Water People. Ms. Russell is from Chinle, Arizona and a citizen of the Navajo Nation. Ms. Russell is the Executive Director of the Navajo Department of Health. She leads a sovereign tribal health department for the biggest tribal reservation in the United States. Kim has worked with Tribes, Tribal Organizations, the Indian Health Service, and Urban Indian Health Programs to advance their health agendas and priorities her entire career. Ms. Russell received her Bachelor of Science degree in Biology and a Master of Health Administration. Kim enjoys spending time with family and her puppy nephews and nieces, and traveling.



Oklahoma Area | Lisa Pivec, MS | Executive Director | Cherokee Nation Public Health Cherokee Nation

Lisa Pivec, MS, is Senior Director of Public Health for Cherokee Nation Health Services. With more than 340,000 tribal citizens, the Cherokee Nation is the largest Tribal Nation in the United States. The Tribe's headquarters are in Tahlequah, Oklahoma, but Cherokee Nation Health Services provides public health as well as clinical delivery services to a geographic area encompassing 14 counties in eastern Oklahoma. In August of 2016, Cherokee Nation Health Services became the first and only tribe to receive accreditation from the Public Health Accreditation Board. Ms. Pivec serves on the Centers for Disease Control and Prevention (CDC) Tribal Advisory Committee as the authorized representative for Oklahoma Area, Oklahoma State Health Department Tribal Public Health Advisory Committee, treasurer for the Southern Plains Intertribal Health Board, and chairs the Public Health subcommittee for the Five Tribes Intertribal Council. She currently is the principal investigator for several funding agreements with the CDC. Ms. Pivec holds a Master of Science degree from Northeastern State University in Tahlequah, Oklahoma. Ms. Pivec is a citizen of the Cherokee originally from the Peavine community in Adair County within the Cherokee Nation and currently resides in Tahlequah where she hopes to continue working with and for her people throughout her career.

CDC/ATSDR TAC Member Biographies



Phoenix Area | Timothy L. Nuvangyaoma | Chairman | Hopi Tribe

Chairman Timothy Nuvangyaoma was born and raised on the Hopi reservation, Tobacco Clan from the Village of Mishongnovi. After completing Junior High School, he left the Hopi reservation to attend Santa Fe Indian School in Santa Fe, New Mexico. He later transitioned to Phoenix, AZ where he began a career in the financial field. After 25 plus years of living in Phoenix, he returned back to his Village of Mishongnovi and engulfed himself in working with non-profits as a volunteer. Chairman Nuvangyaoma also returned to work as a Wildland Firefighter and continued with the Wildland Firefighting Program. Chairman Nuvangyaoma ran for office in 2017 and was elected for a four -year term as Chairman of the Hopi Tribe. Chairman Nuvangyaoma was re-elected and sworn back into office on December 1, 2021, to carry out another four-year term working with, and on behalf of the Hopi people.



Phoenix Area | Dr. Darren Vicenti | Public Health Authority | Hopi Department of Health and Human Service

Darren Vicenti, MD is Sun Clan from Hopi, and is also half-Zuni from his father's side. Born and raised in Albuquerque, NM, he grew up spending time on both reservations. A graduate of the University of New Mexico with a BS in Science led to furtherance of education with graduation from the University of New Mexico, School of Medicine in 1996. Residency in Family Medicine completed at the Southern Colorado Family Medicine Program in Pueblo, CO. A 20+ year career in full-spectrum family medicine ensued with the Indian Health Services, first at Santa Fe Indian Hospital, and then returning home to the Hopi Health Care Center, in Polacca, AZ. Served as the Chief Medical Officer at the Hopi Health Care Center and worked closely with the Hopi Tribe and its leadership to begin work on tribal network expansion and regional collaboration in northern AZ. A passion remains meaningful population health strategic planning for rural native communities to achieve positive health outcomes for all generations. Additionally, mentorship of youth to attain higher education and public health knowledge remains a continual goal. Currently serving as the Public Health Authority for the Hopi Tribe. My hobbies remain learning my native language, coaxing rain while tending my corn field, and maintaining focus on my family, kiva, and community.



Tucson Area | Delma M. Garcia | Councilwoman | Tohono O'odham National Council

CDC/ATSDR TAC Member Biographies



National At-Large | Sharon Stanphill, MD | Chief Health Officer | Cow Creek Health and Wellness Center

Dr. Sharon Stanphill is the Chief Health Officer for the Cow Creek Health & Wellness Center (CCH&WC). The CCH&WC employs 70 staff members and operates 2 primary medical care clinics, a comprehensive behavioral health department including both in-house and tele-psychiatry and therapy services, a prevention specialist and trauma-informed care/resiliency coordinator. The medical teams are supported by laboratory, radiology, medical nutritional therapy, intensive diabetes prevention and treatment program along with many other community programs. In FY 2020, she stood up a robust public health department to address the pandemic and begin to modernize Public health efforts within the Tribe.

Joining the CCH&WC in October 1997, as a preventive care practitioner and dietitian/certified diabetes educator, Dr. Stanphill assisted with coordinating the Southern Oregon Tribal Diabetes Prevention Program (DPP) consortium and served on the National Special Diabetes Program for Indians (SDPI) Diabetes Demonstration Projects Steering Committee during the formative years of the SDPI.

She has been a delegate, representing the Cow Creek Band of Umpqua Tribe of Indians, to the Northwest Portland Area Indian Health Board for the past 22 years and has been honored to receive the Delegate of the Year Award twice by her peers.

Dr. Stanphill serves on several Portland Area Indian Health Services committees and was appointed by the Portland Area Indian Health Services as the Portland Area Tribal Leaders Diabetes Committee, CDC Tribal Advisory Committee and CMS Tribal Advisory Committee representing all 43 Tribal Nations of the Northwest.

Her special interest in assuring information technology is of the highest quality. She works to assure Oregon's Tribal Nations are included in the State's expansion of health information technology having served previously on the State of Oregon's Governor's Health Information Technology Office of Health (HITOC) Advisory Committee. She has most recently become a member of the Criminal Justice Commission IMPACT Committee appointed in 2019 and the Governor's Task Force on Universal Healthcare in 2020. Dr. Stanphill is the Cow Creek's tribal representative for all healthcare related State of Oregon SB770 consultations.

Within Douglas County, Oregon, she serves on various committees including the local Coordinated Care Organization, Umpqua Health Alliance, Board of Directors and the local hospital Mercy Medical Center Foundation Board.

Dr. Stanphill received her Master of Public Health in Nutrition degree and Doctorate of Public Health in Preventive Medicine in 1993 from Loma Linda University School of Medicine. She is married to her husband Jim for 36 years and they have 3 grown children who all have graduated from George Fox University and are living and working in the greater Portland, Oregon area.

CDC/ATSDR TAC Member Biographies



National At-Large | Herminia "Minnie" Frias, MPH | Pascua Yaqui Tribe | Council Member

Ms. Herminia "Minnie" Frias was born and raised in Tucson, Arizona. She is a first-generation college graduate, and the first of her family to graduate college with a Bachelor of Science Degree in Biochemistry in 1999 and Master of Public Health in 2008, both from the University of Arizona. When she is not working, she loves to unwind by spending time with her family, hiking, riding her bike, taking long walks with her dog Petri, and reading.

Her love of learning has allowed Ms. Frias to successfully adapt to change. Ms. Frias was honored to serve as Chairwoman for the Pascua Yaqui Tribe from 2004-2007. During her work as an administrator for the University of Arizona and Executive Director for Native Images, Inc. she has become seasoned in executive management, project management, fundraising, and non-profit administration. In 2010, she joined the Native Nations Institute (NNI) for Leadership, Management, and Policy team. At NNI, she worked with the 23 Native Nations of Minnesota, North Dakota, and South Dakota in governance systems analysis, constitution reform, and leadership development. Later, she joined Blue Stone Strategy Group, a consulting group, where she worked primarily with Native Nations from Arizona, Florida, Oregon, and Washington, assisting them with organizational analysis and strategic planning.

Ms. Frias's career has been dedicated to serving Indian country. In 2016, she was elected to Tribal Council once again. She is currently serving her second consecutive term on Tribal Council. She is Chairwoman of the Pascua Yaqui Health Oversight Committee and President of the Pascua Yaqui Development Corporation Board, and she sits on the other national committees and boards including the National Institute of Health TAC and the Eller Executive Education Board. She has a tireless work ethic and is known for being more than just an advocate. Her "take charge" personality has earned her a reputation for getting things done, setting goals, and inspiring others to reach those goals. As a lifelong learner and mentor, she believes there are no mistakes, only lessons learned and opportunities for reflection and growth.

CDC/ATSDR TAC Member Biographies



National At-Large | Del Beaver | Second Chief | The Muscogee (Creek) Nation

In 2019, Del Beaver was elected by the citizens to serve as the Second Chief of the great Muscogee (Creek) Nation. It was the beginning of this unprecedented time the leadership abilities to navigate a worldwide pandemic and the landmark decision of the U.S. Supreme Court McGirt case came to being.

As the Second Chief of the 4th largest native nation in the United States, the responsibilities are numerous and endless. Since being elected, Second Chief Beaver has made it a top priority to enhance and protect the language and culture of the Nation. Prior to being elected Second Chief, Del was elected to serve on the Nation's National Council as the Okmulgee District Representative. While on the Council, he served on the Land, Natural Resources, & Culture Committee. After graduating with a B.S. in Environmental Services and a M.S. in Industrial Operations at Northeastern State University, Del began his professional career as an Environmental Protection Specialist. He later became the Director of the MCN Office of Environmental Services, overseeing numerous programs that directly affected the health and wellbeing of the citizens. Del is also a graduate of the 2023 Leadership Oklahoma class and the 2019 Leadership Native Oklahoma class.

Following the personal motto of "Faith, Family, Work", Del also serves as an associate Pastor at Native Stone Baptist Church. He has been happily married to his wife, Rhonda, for 18 years and have 3 children and 1 grandchild. He is a proud softball dad and loves to watch his kids and go fishing.



Abbi Lee, PhD, MPH | Public Health Director | Muscogee (Creek) Nation Department of Health

Abbi Lee, PhD, MPH, based in Beggs, OK, US, is currently a Public Health Director at Muscogee (Creek) Nation Department of Health, bringing experience from previous roles at Divine Health and Wellness, Radiology Partners and Susan G. Komen. Abbi Lee holds a 2013 - 2022 Doctor of Philosophy (PhD) in Hospital and Health Care Facilities Administration/Management from Walden University. With a robust skill set that includes Leadership, Event Planning, Microsoft Office, Crisis Intervention, Team Building and more, Abbi Lee contributes valuable insights to the industry.

CDC/ATSDR TAC Member Biographies



National At-Large | Cary Fremin | Director of Health and Social Services | Village of Dot Lake Council

Cary Fremin is the Director of Health and Social Services for Dot Lake Village in Alaska and is also a tribally elected village council member. Cary has worked in healthcare for over 20 years in various roles from front line nursing to managing federally qualified health centers. She works tirelessly to advocate for the healthcare and behavioral health needs for tribal members and her community. Cary has worked in both urban and rural areas and has experience in many different settings to offer a different lens of the needs of each community.

Cary received her Bachelor of Science in Health Sciences from University of Alaska Anchorage and has been furthering her education by taking classes on tribal governance and ethnobotany. Her goal is to continue her advocacy for all tribal members and for her community to ensure the well-being of all people in Alaska. Her thirst for knowledge always has her looking for educational opportunities so that she can add more tools to help her become a better resource for those that need assistance.

Cary also sat on a Center for Disease Control Health Equity workgroup which gave her the unique opportunity to give a realistic view to the CDC on what healthcare problems the Native peoples of Alaska face. She also sits on various committees and boards such as the Upper Tanana/40-mile Fish and Game advisory committee, the Alaska Tribal Public Safety Advisory committee, and Dot Lake Corporation Board.

Cary lives in Palmer, AK with her husband and family. She is an avid fiber artist and works with her local fiber guild to promote education and expansion of fiber skills in her community. Cary loves to practice traditional subsistence hunting, fishing, and gathering-working to preserve Indigenous knowledge for future generations.