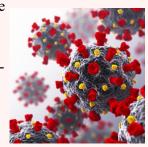
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Long COVID-19

Individuals who experience Long COVID-19 are those who had the COVID-19 virus but continue to have persistent symptoms including shortness of breath, fatigue, headaches, palpitations and impairments in mental health and cognition. These symptoms can last weeks, months and even years. There are more than 200 symptoms identified for Long COVID; however, the most common include fatigue, brain fog and worsening of symptoms after physical exertion. Other symptoms can include difficulty breathing or shortness of breath, coughing, chest pain, fast-beating or pounding heart (heart palpitations), headaches, problems sleeping, difficulty thinking or concentrating, change in smell or taste, depression, anxiety and more. There is currently no laboratory test to determine if a person's unexplained symptoms are due to Long COVID. The treatment is primarily focused on managing symptoms and receiving the appropriate care to reduce

primarily focused on managing symptoms and receiving the appropriate care to reduce any burden impacting daily activities and improving quality of life. Some who had severe cases of COVID-19 may experience multi-organ effects or autoimmune conditions lasting weeks, months or even years (CDC). Multi-organ effects could cause diabetes, heart conditions, blood clots and neurological conditions (CDC). If you were diagnosed with COVID-19, discuss any ongoing symptoms you are having with your provider to ensure a high quality of life. It is important to treat your symptoms to prevent them from impacting daily activities.



Meet Nacole Brown



My name is Nacole Brown and I am a school-to-work student in the Chickasaw Nation Office of Health Policy. I am currently enrolled at East Central University working toward my Bachelor of Business Management degree. Four years ago, I started my own body sculpting and cavitation business. I am also a student massage therapist

awaiting my license. I am a proud mother of two who are my main motivations in my goals and successes. I am deeply grateful for the opportunity to be part of the Chickasaw Nation. This experience has been both enriching and inspiring, allowing me to collaborate with an incredible team and contribute to meaningful projects. The support, camaraderie and shared vision within this department have not only enhanced my professional growth but also made my time here rewarding. I feel fortunate to be surrounded by such talented and dedicated individuals.

Malcolm Baldrige Award

The Chickasaw Nation Department of Health earned the prestigious Malcolm Baldrige Award. This award focuses on organizational resilience and long-term success. The Malcolm Baldrige Award is the nation's only presidential award for performance excellence. The Baldrige Award recipients are role-model organizations that help address some of the most critical needs while demonstrating the resilient spirit of the American people. Receiving this award exemplifies the efforts made

by the Chickasaw Nation
Department of Health to bettering the lives of First
Americans, strengthening
infrastructure and improving
the quality of life in communities. Congratulations to the
Chickasaw Nation for earning this prestigious award!



Medicare, Medicaid and Health Reform Policy Committee

The Medicare, Medicaid and Health Reform Policy Committee (MMPC) is a committee of the National Indian Health Board (NIHB) that has been in place since 2004. MMPC serves to help the NIHB evaluate program and payment policies for the Centers for Medicare and Medicaid Services (CMS). MMPC is chaired by the NIHB board of directors and makes recommendations about policies that impact Indian Health Service (IHS), Tribal and Urban Indian (ITU) programs. All 12 areas of the IHS system are represented through this committee. The 12 areas are Alaska, Albuquerque, Bemidji, Billings, California, Great Plains, Nashville, Navajo, Oklahoma City, Phoenix, Portland and Tucson. In addition, MMPC includes members from Tribal Self-Governance, National Indian Health Board, National Congress of American Indians and Indian Health Service that may attend these meetings. The membership of NIHB is open to individuals who represent these organizations. The MMPC is an advisory group who provides technical support to CMS on issues related to Medicare, Medicaid, Children's Health Insurance Program and other health care programs funded by CMS.

Monthly teleconference calls take place along with three face-to-face meetings per year. The MMPC meets the day prior to Tribal Technical Advisory Group (TTAG) for face-to-face meetings and helps prepare for work with federal partners at CMS. There are several standing committees of the MMPC that also meet regularly. These committees include MMPC Regulations Workgroup, Managed Care Workgroup and MMPC IHS Tribal Workgroup.

Snyder Report



The Snyder Act of 1924, also referred as the Indian Citizenship Act of 1924, was named in honor of Homer P. Snyder. (Chickasaw.tv). This historic act granted First Americans full United States citizenship. It was considered the most sig-

nificant achievement of Rep. Homer P. Snyder (R) of New York who was Chairman of the Committee on Indian Affairs. The act authorized appropriation and expenditure for the administration of Indian Affairs for education, relief of distress and conservation of health. Homer became known for his advocacy for First Americans. While the original act did not explicitly state the right to vote, the Snyder Act of 1924 helped to pave the way for First Americans to have the right to vote. This happened later in the 20th century.

The right to vote is an important part of our sovereign voice as First Americans and our collective political power. One way to be an advocate is to exercise our right to vote. Advocacy for our rights as United States citizens is done nearly every day in our nation (Native American Rights Fund).

Health Policy Landing Page

The landing page for the Chickasaw Nation Office of Health Policy has officially launched! The landing page describes our office's focus and our work to positively benefit health policy initiatives for Chickasaw citizens. The landing page will also include editorials our office produces, such as month-



ly Chickasaw Times articles, community outreach newsletters, health briefs, Health Matters articles, leadership newsletters and any other materials created by request. Visitors can also listen to KCNP interviews

with Dr. Parker. Legislation updates regarding health policy changes and public health issues will also be provided on the landing page. If you would like to visit the landing page, visit: ChickasawNa-

tionHealth.net/
HealthPolicy or
scan the QR code
to be directed to
the Office of
Health Policy
landing page.

Have questions or suggestions for the Office of Health Policy?

Please send an email to Judy.Parker@Chickasaw.net