[This letter will be sent to the following:]

Speaker Nancy Pelosi  
Majority Leader Charles Schumer  
 Minority Leader Kevin McCarthy  
Minority Leader Mitch McConnell

House Committee Appropriations:  
Chair Rosa DeLauro  
Ranking Member Kay Granger

Senate Committee Appropriations:
Chair Patrick Leahy  
Ranking Member Richard Shelby

Subcommittee on Interior, Environment, And Related Agencies:
Chair Chellie Pingree  
Ranking Member David Joyce

Committee on Indian Affairs:
Chair Jeff Merkely  
Ranking Member Lisa Murkowski

Natural Resources Committee:
Chair Raul Grijalva  
Ranking Member Bruce Westerman

Committee on Indian Affairs:
Chair Brian Schatz  
Vice Chair Lisa Murkowski

Native American Caucus:
Co-Chair Sharice Davids  
Co-Chair Tom Cole

Re: Indian Health Care Funding and Advance Appropriations

Dear [Member of Congress]

On behalf of the undersigned Tribal nations, Tribal and national Indian organizations, and friends of Indian health, we write to respectfully request that you support and include Advance Appropriations and no less than the House-passed level of $8.114 billion for the Indian Health Service (IHS) in the final Appropriations bill for FY 2022.

We call upon Congress to honor the United States’ trust responsibility to Tribal nations and treaty obligations for the Indian health care by securing these requests to improve the health care status of American Indian and Alaska Native people.\(^1\) Tribal nations exchanged millions of acres of land for the agreements and promises in the treaties between our nations, including the obligations for comprehensive health care from the United States.

Accordingly, these federal responsibilities are carried out, in part, by the IHS, within the Department of Health and Human Services. This agency provides both direct care and resources for the delivery of health care services to American Indian and Alaska Native people.\(^2\) The IHS

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\(^1\) Congress declared the fulfillment of the trust responsibility and treaty obligations to achieve the highest health care levels for American Indians and Alaska Natives and to provide the requisite resources to be the policy of this Nation in the Indian Health Care Improvement Act. 25 U.S.C. §1602.

\(^2\) Although the federal trust responsibility and treaty obligation extends throughout the federal government, the IHS is the primary agency which carries out these responsibilities. The IHS provides health care services either directly
and the Indian health care delivery system are unique among federal health care-related agencies in this regard.

American Indian and Alaska Native people often face the most significant health disparities among all populations in the United States. The rates of diabetes, suicides, behavioral health challenges, COVID-19 infections, hospitalizations, and deaths are higher than most other populations. Yet, the Indian health care delivery system is underfunded by nearly 50% of appropriate levels to address these health care disparities.

Strategic investments from the COVID-19 relief funding packages such as the American Rescue Plan Act, have been welcomed. However, the underlying conditions which contributed to the tragic COVID-19 outcomes remain to be addressed. These conditions include, for example, the lack of adequate health care facilities, specialty care facilities, available workforce, and consistent and recurring funding for prevention and treatment services.

This chronic underfunding significantly limits the availability and accessibility of health care services for these communities. It also leaves the Indian health care delivery system particularly vulnerable to the instability of the federal funding process when Continuing Resolutions or a government shutdown may occur.

Each day without full funding, with only temporary or no funding from the Continuing Resolutions or a government shutdown, is a step backward for the Indian health care delivery system. Health care service delivery, administrative functions, and other operations are significantly impeded, delayed, or disrupted during periods of Continuing Resolutions or a government shutdown to the detriment of the American Indian and Alaska Native patients.

Congress can change that. The United States and Tribal nations share a government-to-government relationship and a mutual resolve to improve the health of our communities. Securing the House-passed levels of funding and Advance Appropriations will provide the initial step forward to funding stability for the Indian health care delivery system.

We urge Congress to take this necessary step and stand ready to work with you in improving the lives of American Indian and Alaska Native people. Thank you for your consideration in this matter.

Sincerely,

[SIGNATORIES]

to American Indian and Alaska Native people, or through contracts or compacts with Tribal nations which, in turn, provide the services. The IHS may also enter contracts with urban Indian organizations to provide health care services to American Indian and Alaska Native people in certain urban locations.