

Submitted via email

October 15, 2019

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, D.C. 20510

The Honorable Nita Lowey
Chair
U.S. House Appropriations Committee
Washington, D.C. 20510

Dear Madam Speaker and Chairwoman Lowey,

On behalf of the National Indian Health Board (NIHB) and the 573 federally-recognized American Indian and Alaska Native (AI/AN) Tribes we serve, I write to urge you to maintain a high 302(b) subcommittee allocation for Fiscal Year (FY) 2020 appropriations under Interior, Environment, and Related Agencies. For far too long the Indian Health Service (IHS) – which receives appropriations under the Interior budget – has been chronically underfunded, contributing to the higher rates of health disparities and lower life expectancy of AI/ANs.

Trust Responsibility

The federal promise for quality health services to all Tribes and AI/AN Peoples was made long ago. Established through treaties, the federal trust responsibility has been continuously reaffirmed by Supreme Court case law, federal legislation and regulations, and even presidential executive orders. During permanent reauthorization of the Indian Health Care Improvement Act in 2010, Congress declared that, “...it is the policy of this Nation, in fulfillment of its special trust responsibilities and legal obligations to Indians . . . to ensure the highest possible health status for Indians and urban Indians and to provide all resources necessary to effect that policy.”¹

Despite these promises, the federal government has yet to live up to the responsibility to provide adequate health services to AI/AN Peoples. According to the IHS Tribal Budget Formulation Workgroup, IHS appropriations must reach \$37.61 billion – phased in over twelve years – to fully meet current health needs.² In contrast, FY 2019 IHS appropriations were at roughly \$5.8 billion. Per capita medical expenditures within IHS were \$4,078 in FY 2017, compared with \$9,726 in national spending that same year. As a result, quality and comprehensive health services remain inaccessible across many Tribal communities.

House Interior Appropriations

Earlier this year, using a deeming resolution, the House passed H.R. 3055 – a five-bill minibus that included the FY 2020 Interior budget. The Interior bill included a much-needed 9% – or \$537 million – overall increase to IHS. Tribal Nations and NIHB were very pleased to see that the House bill not only rejected the proposed budget cuts outlined in the President’s Budget Request, but also

¹ 25 U.S.C. § 1602

² The full IHS Tribal Budget Formulation Workgroup Recommendations are available at https://www.nihb.org/docs/04242019/307871_NIHB%20IHS%20Budget%20Book_WEB.PDF

included important increases to the IHS Services and Facilities accounts. Namely, the House package increased funding for IHS Services by roughly \$454 million above the FY 2019 enacted level, and roughly \$85 million above the FY 2019 enacted level for IHS Facilities.

Importantly, the House package included a new \$20 million investment to nationalize the highly successful Community Health Aide Program (CHAP); a new \$25 million investment towards the Administration's *Ending the HIV Epidemic: A Plan for America* and *Eliminating Hepatitis C in Indian Country* initiatives; and a new \$25 million investment to assist in modernization of the IHS electronic health record (EHR) and health information technology (IT) systems. These critical increases honor the federal trust responsibility by strengthening health systems capacity and improving the availability of health services throughout Indian Country.

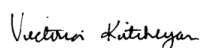
We recognize that there are discrepancies between the spending levels in the House-passed appropriations bills and the topline spending levels established in H.R. 3877 – the Bipartisan Budget Act of 2019. However, **Tribal Nations and NIHB strongly urge you to maintain the increases allocated for IHS under H.R. 3055. Maintaining a strong 302(b) allocation for the Interior budget is integral towards honoring the federal trust responsibility for health for AI/AN Peoples.**

In recent years, the 2-3% nominal increases to IHS appropriations have not accounted for rising medical and non-medical inflation, population growth, facility maintenance costs, and other necessary expenses. In addition, only once in the past two decades has Congress successfully passed Interior appropriations before the start of the next fiscal year. Indeed, the use of Continuing Resolutions (CRs) has disproportionately impacted the Indian health system, which remains the only federal healthcare entity subject to government shutdowns and CRs. The effective result is, year after year, IHS is unable to make meaningful improvements towards reducing the significant health disparities experienced by AI/AN Peoples.

Tribes and NIHB continue to advocate for enactment of advance appropriations for IHS and other Indian programs to protect them from destabilizing government shutdowns and CRs, but also to ensure much-needed stability and continuity of care. We are very encouraged by the growing bipartisan momentum for advance appropriations, including the recent legislative hearing before the House Natural Resources Subcommittee for Indigenous Peoples on H.R. 1128 introduced by Subcommittee Chair Betty McCollum; and H.R. 1135 introduced by Representative Don Young.

While advance appropriations would ensure timely access to health funding, the federal government must still live up to its promise to fully fund Indian health care. **We stand ready to work with Congress in a bipartisan fashion to ensure a high 302(b) subcommittee allocation for Interior, Environment, and Related Agencies for FY 2020 appropriations and beyond.**

Sincerely,



Victoria Kitcheyan, Chair
National Indian Health Board

cc: Hon. Kevin McCarthy, Minority Leader, House of Representatives
Hon. Kay Granger, Ranking Member, Committee on Appropriations, House of
Representatives
Hon. Betty McCollum, Chair, Appropriations Subcommittee on Interior, Environment, and
Related Agencies, House of Representatives
Hon. David Joyce, Ranking Member, Appropriations Subcommittee of Interior,
Environment, and Related Agencies, House of Representatives