



December 4, 2020

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Chuck Schumer
Minority Leader
U.S. Senate
Washington, DC 20510

Re: Request Passage of Tribal Veterans Bills this Congress

Dear Speaker Pelosi, Majority Leader McConnell, Minority Leader McCarthy, and Minority Leader Schumer:

On behalf of the undersigned national organizations collectively serving all 574 sovereign federally-recognized American Indian and Alaska Native (AI/AN) Tribal Nations and all 41 urban Indian organizations (UIOs), we write to urge you to ensure the passage of the following tribal veteran bills in any legislative vehicle before the end of the 116th congress:

- H.R. 4908 / S. 4909 - Native American Veterans PACT Act
- S. 524 / H.R. 2791 - Veterans Affairs Tribal Advisory Committee Act of 2019
- S. 2365 / H.R. 4153 - Health Care Access for Urban Native Veterans Act of 2019
- H.R.6237 - PRC for Native Veterans Act

AI/ANs have a long history of distinguished service to this country. Per capita, AI/ANs serve at a higher rate in the Armed Forces than any other group of Americans and have served in all the nation's wars since the Revolutionary War. In fact, AI/AN veterans served in several wars before they were even recognized as U.S. citizens. Despite this esteemed service, AI/AN veterans have lower personal incomes, higher unemployment rates, and are more likely to lack health insurance than other veterans.

The United States must honor its commitments to AI/AN veterans. The federal government's responsibility to provide quality healthcare to AI/AN veterans comes both from their service to this country and the federal government's treaty and trust obligations to AI/AN people. If enacted, the legislation listed above, and detailed below, moves us closer to fulfilling the federal government's dual responsibility to AI/AN veterans, regardless of whether they are living on rural reservation lands or in major urban areas.

H.R. 4907 / S. 4909 - Native American Veterans PACT Act

Currently, AI/AN veterans are required to pay a copayment before receiving services at the VA. In the fiscal year 2017, approximately 30 percent of AI/AN veterans were charged copayments, averaging approximately \$281.56 per veteran,¹ representing a significant barrier to care for AI/AN veterans. The Native American Veterans PACT Act would eliminate copayments for AI/AN veterans accessing VA health care and would bring parity between those AI/AN veterans receiving services at VA and those who receive services through the Department of Health and Human Services (HHS) Indian Health Service (IHS) and under Medicaid.

The House passed H.R. 4907 on September 22, 2020, and S. 4909 was introduced on November 18, 2020, with bipartisan support. We thank Representative Ruben Gallego for introducing H.R. 895, and Senator Jon Tester and Jerry Moran for introducing S. 4909. In 2020, NCAI passed Resolution #PDX-20-008 in support of this legislation.

S. 524 / H.R. 2791 - Veterans Affairs Tribal Advisory Committee Act of 2019

AI/AN veterans, tribal leaders, and GAO have expressed the need for VA to engage with tribal stakeholders when assessing, developing, and implementing AI/AN veterans' policy. The Veteran Affairs Tribal Advisory Committee Act of 2019 would help fulfill this need by establishing a VA Tribal Advisory Committee (VATAC). A VATAC would advise the Secretary on improving programs and services for AI/AN veterans, identify timely issues related to VA programs, propose solutions to identified issues, provide a forum for discussion, and help facilitate getting useful feedback from Indian Country. Building a strong relationship between the VA and tribal nations will increase awareness and understanding across the VA of the unique issues affecting AI/AN veterans in tribal communities. This awareness paired with more direct interaction with tribal leaders who regularly hear from AI/AN veteran constituents will ultimately produce faster solutions and better services for AI/AN veterans.

The Senate Committee on Veterans Affairs ordered S. 524 out of Committee favorably on January 29, 2020. The House Committee on Veterans' Affairs ordered H.R. 2791 favorably on July 30, 2020. We thank Senator Jon Tester for introducing S. 524 and Representative Deb Haaland for introducing H.R. 2791. In 2019, NCAI passed Resolution #REN-19-033 in support of this legislation.

S. 2365 / H.R. 4153 - Health Care Access for Urban Native Veterans Act of 2019

UIOs are an essential part of the Indian healthcare delivery system. AI/AN veterans often prefer to use Indian healthcare providers, including UIOs, for reasons such as cultural competency, community and familial relations, and shorter wait times. However, UIOs are currently ineligible to be reimbursed for the services they provide to AI/AN veterans. The Health Care Access for Urban Native Veterans Act of 2019 would amend the Indian Health Care Improvement Act (IHCIA) to enable the VA to reimburse UIOs for services to VA beneficiaries at urban Indian health centers.

¹ U.S. Gov't Accountability Office, GAO-19-291, Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Native Veterans (2019).

The Senate placed S. 2365 on the Senate Legislative Calendar under General Orders on December 18, 2019. The House H.R. 4153 on December 3, 2020. We thank Senator Tom Udall for introducing S. 2365 and Representative Ro Khanna for introducing H.R. 4153. In 2019, NCAI passed Resolution #REN-19-034 in support of this legislation.

H.R. 6237 - PRC for Native Veterans Act

Currently, VA reimburses IHS and tribally-run health programs for costs related to direct care to AI/AN veterans within IHS and tribal facilities. Unfortunately, the VA does not reimburse either entity for the cost of services provided by the Purchased Referred Care (PRC) program, despite IHS being codified under federal law as the payer of last resort. The PRC for Native Veterans Act would amend the IHCA to clarify that the VA and the Department of Defense are required to reimburse the IHS and tribally-run health programs for healthcare services provided to AI/AN veterans through an authorized referral.

The House passed H.R. 6237 on July 29, 2020. We thank Representative Ruben Gallego for introducing H.R. 6237. In 2020, NCAI passed Resolution #REN-19-054 in support of this legislation.

We thank you for your continued commitment to Indian Country, and as always, stand ready to work with you in a bipartisan fashion to advance the wellbeing of our AI/AN veterans.

Sincerely,

National Indian Health Board
National Congress of American Indians
National Council of Urban Indian Health