

National Indian Health Board



The Red Feather Of Hope And Healing

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Rachel Joseph asks for the Permanent Enactment of the Indian Health Care Improvement Act

Washington, DC – Representing the National Indian Health Board and the National Tribal Steering Committee (NTCS) for the Reauthorization of the Indian Health Care Improvement Act (IHCIA), Rachel Joseph testified in a hearing held by the House Energy and Commerce Subcommittee on Health on H.R. 2708- the Indian Health Care Improvement Act Amendments of 2009.

“To bring stability to our system, it is critical that the IHCIA be made a permanent law of the United States, just as the Federal Government’s trust responsibility to provide health care to Indian Tribes is a permanent obligation of the Federal government,” said Rachel Joseph, a member of the Lone Pine Paiute-Shoshone Tribe of California and Co-Chair of the National Tribal Steering Committee for the Reauthorization of the Indian Health Care Improvement Act who has worked on this reauthorization for more than a decade.



“Indian Country has willingly and substantively participated in this process,” stated Joseph in regards to the ten years that tribal governments have dedicated to support the passage of IHCIA. She described the commitment level of tribal leaders who instituted a “no cell phone” policy in their meetings to focus on maintaining a consensus of what recommendations were needed in the current legislation that would meet the basic needs of all tribes. The tribes also committed valuable resources to participate in these meetings with the intent to see improvement.

Some of the recommendations from the NTCS include upgrading authorities for Epidemiology Centers, Comprehensive Behavioral Health Programs, and Tax Treatment for certain services and benefits. “There is no reason why this should not be enacted this year,” said Joseph.

U.S. Representative Frank Pallone, Jr. (D-NJ), Chairman of the House Energy and Commerce Subcommittee on Health said, “something is owed to American Indians for the lands that were both voluntarily given to the United States and forcefully taken, as well as the atrocities that were committed against their peoples” as he referred to the trust responsibility the federal government has to provide health care.

“The quality of health care services available to American Indians certainly falls well below the rest of the general population which in turn has resulted in the worse health outcomes for Native communities,” said Pallone, “in fact, we spend more to provide health care to federal inmates than we do for American Indians, which is a statistic that I continue to be shocked by.”



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Dr. Yvette Roubideaux, Director of Indian Health Services testified before the Subcommittee that I.H.S. strongly supports the reauthorization of the IHCA. Jefferson Keel, President of the National Congress of American Indians also testified saying, "I would like to ask the Committee to set a schedule and procedure when the bill will be passed and enacted."

Andrew Joseph, Jr., Direct Services Tribe Advisory Committee, and Chairman of the Portland Area Indian Health Board, talked about the need for the Catastrophic Health Emergency Fund (CHEF) to be included in the bill saying, "some tribes and Alaskan villages are in remote villages, and by not having CHEF included I am afraid we will lose lives. There are distances that have to be traveled to get to a hospital facility and we need those funds. It's like sending troops to war and not paying for the helicopter to get a wounded soldier out"

"Health care remains the top priority in Indian Country, and the reauthorization of the IHCA holds the most promise of improving the health status and outcomes in Indian Country," said Joseph.

Representative Pallone said, "We cannot simply say we are going to increase funding for the IHS and call it a day because it is not just a matter of funding, it's a matter of making sure these programs work well and can meet the needs that are present in those communities. The bill we are looking at today would make important changes to the delivery of health care services in these communities to make sure needs are being met. That is why we must make sure this bill is passed in this Congress. It has languished around here for far too long."

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The National Indian Health Board advocates on behalf of all Tribal Governments and American Indians/Alaska Natives in their efforts to provide quality health care. Visit www.nihb.org for more information.



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