## National Indian Health Board

National Indian Health Board Resolution 23 – 08

## Support for Fair and Proportional Facilities Support Account Resources for Tribal Health Programs

WHEREAS, the National Indian Health Board (NIHB), established in 1972, serves all federally recognized American Indian/Alaska Native (AI/AN) Tribal governments by advocating for the improvement of health care delivery to AI/ANs, as well as upholding the federal government's trust responsibility to AI/AN Tribal governments; and

**WHEREAS**, NIHB seeks to reinforce the sovereign rights of all federally recognized Tribal governments, to promote the highest levels of health for AI/AN people and to advise the Federal government in the development of responsible health care and public health policy; and

**WHEREAS**, federal trust and treaty obligations are the result of the millions of acres of land and extensive resources ceded to the United States—oftentimes by force— in exchange for which it is legally and morally obligated to provide benefits and services in perpetuity, as well as uphold Tribal sovereignty; and,

**WHEREAS**, the Indian Self-Determination and Education Assistance Act authorizes Tribes and Tribal organizations to be funded by the Federal government to provide services that the Federal government would otherwise be obligated to provide due to the trust and treaty obligations of the United States; and

**WHEREAS**, the Indian Health Service (IHS) withholds, or significantly limits, certain resources provided to Tribally operated 638 Health Programs; and

**WHEREAS**, these resources are retained for the use of IHS facilities but may also benefit Tribal communities in the Areas where they are provided; and,

**WHEREAS**, among the resources withheld from Tribal Health Programs is funding from the Facilities Support Account (FSA); and,

WHEREAS, according to the IHS Facilities Appropriation Information Report, FSA staff "responsibilities include facilities-related management activities, operation and maintenance of real property, clinical engineering & medical equipment technical support, and planning and construction management support for new and replacement health facilities projects"; and,

**WHEREAS**, IHS Areas that have no, or too few, IHS facilities receive disproportionally fewer FSA resources than other Areas; and

**WHEREAS**, the severe scarcity of FSA staff in these Areas leads to the needs and deficiencies of many Tribal communities going unacknowledged and underreported; and

**WHEREAS**, Tribes in these Areas do not have the necessary level Area wide staff resources available to collect data and report to the IHS for resource distribution, which positions some Tribal communities at a severe disadvantage, and leads to worse health outcomes.

**NOW THEREFORE BE IT RESOLVED**, that the NIHB supports fair and proportionate Facilities Support Account funding for all IHS Areas regardless of the absence of IHS facilities; and

**THEREFORE, BE FURTHER IT RESOLVED,** that the NIHB calls on the IHS and Congress to address this issue immediately with new and additional funding to protect current Area FSA budgets; and,

**BE IT FINALLY RESOLVED**, that this resolution shall be the policy of the National Indian Health Board until it is withdrawn or modified by subsequent resolution.

## CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 22nd day of June, 2023.

Chairperson, William Smith

ATTEST:

Vice Chairperson, Nickolaus Lewis