## National Indian Health Board

National Indian Health Board Resolution 24 – 01

## SUPPORT FOR EXECUTIVE ORDER ON REFORMING FEDERAL FUNDING AND SUPPORT FOR TRIBAL NATIONS TO BETTER EMBRACE OUR TRUST RESPONSIBILITIES AND PROMOTE THE NEXT ERA OF TRIBAL SELF-DETERMINATION (E.O. 14112)

**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, on December 6, 2023, President Biden signed an Executive Order on Reforming Federal Funding and Support for Tribal Nations To Better Embrace Our Trust Responsibilities and Promote the Next Era of Tribal Self-Determination (E.O. 14112); and

**WHEREAS**, E.O. 14112 marks the continuation and further advancement of the administration's historic commitment to a simple promise – to uphold this Nation's treaty and trust obligations to Tribal Nations and their citizens; and

**WHEREAS**, E.O. 14112 reiterates the United States' commitment to protecting and supporting Tribal sovereignty and self-determination, while also recognizing the intentional role the United States played in creating the conditions we experience in our communities today; and

WHEREAS, E.O. 14112 calls on the head of each federal agency to design, revise, provide waivers for, and otherwise administer Federal funding and support programs for Tribal Nations that promote compacting, contracting, co-management, co-stewardship, and other agreements with Tribal Nations that allow them to partner with the Federal Government to administer Federal programs and services; and

**WHEREAS**, E.O. 14112 directs agencies to identify programs that may allow for Tribal set-asides and establish these set asides when available in the law; and

**WHEREAS**, E.O. 14112 directs agencies to increase the flexibility of Federal funding for Tribal Nations by removing, where feasible, unnecessary limitations on Tribal spending, including by maximizing the portion of Federal funding that can be used for training, administrative costs, and additional personnel; and

WHEREAS, E.O. 14112 requires agencies to respect Tribal data sovereignty and

recognize the importance of Indigenous Knowledge by, when appropriate and permitted by statute, allowing Tribal Nations to use self-certified data and avoiding the establishment of processes that require Tribal Nations to apply to, or obtain permission from, State or local governments to access Federal funding or to be part of a Federal program; and

WHEREAS, E.O. 14112 requires agencies to provide Tribal Nations with the flexibility to apply for Federal funding and support programs through inter-Tribal consortia or other entities while requiring non-Tribal entities that apply for Federal funding on behalf of, or to directly benefit, Tribal Nations to include proof of Tribal consent; and

**WHEREAS**, E.O. 14112 requires agencies to provide ongoing outreach and technical assistance to Tribal Nations throughout the application and implementation process while continually improving agencies' understanding of Tribal Nations' unique needs through Tribal consultation and meaningful partnership; and

**WHEREAS**, E.O. 14112 requires the Director of The Office of Management and Budget (OMB), in consultation with federal agencies, to develop guidance for assessing the additional funding each agency needs for its existing Federal funding and support programs for Tribal Nations to better live up to the Federal Government's trust responsibilities and help address the needs of all Tribal Nations by August 2, 2024; and

WHEREAS, E.O. 14112 directs federal agencies to consult with Tribal Nations on this guidance by May 29, 2025; and

WHEREAS, the Department of Health and Human Services (HHS) operating divisions outside of the Indian Health Service provide less than one percent in federal funding to Tribal nations even though the combined AI/AN population would represent the 15th most populous state, with the 12th largest landmass; and

**WHEREAS**, NIHB has advocated for the policies outlined in E.O. 14112 for decades including creating a 10% set aside for all HHS-operated programs, eliminating Tribal matching requirements for federal programs, expanding Tribal self-governance at HHS, and reducing administrative burdens for federal programs going to tribes.

**BE IT RESOLVED,** that NIHB strongly supports E.O. 14112 and the implementation thereof.

**BE IT RESOLVED,** that NIHB Calls upon the Department of Health and Human Services to swiftly implement E.O. 14112.

**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 a quorum present, on the 13th day of March 2024.

ATTEST:

Chairperson, William Smith

Vice Chairperson, Sam Moose