

National Indian Health Board



National Indian Health Board Resolution 14 – 05

Declaration for a State of Crisis in Indian Country Due to Budget Shortfalls

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, the unmet health needs of American Indians and Alaska Natives are severe and the health status of American Indians and Alaska Natives is far below that of the general population of the United States, resulting in an average life expectancy for American Indians and Alaska Natives 4.2 years less than that for the U.S. all races population; and

WHEREAS, the trust relationship requires the Federal government to provide for the health and welfare of Tribal nations, the Indian Health Service (IHS) remains chronically underfunded at only 59 percent of need, and American Indians and Alaska Natives suffer from among the lowest health status nationally; and

WHEREAS, the United States assumed the trust responsibility through a series of treaties with Tribes, exchanging compensation and benefits for Tribal land and peace. The Snyder Act of 1921 (25 USC 13) legislatively affirmed this trust responsibility. To facilitate upholding its responsibility, the federal government created the Indian Health Service (IHS) and tasked the agency with providing health services to AI/ANs; and,

WHEREAS, In 2010, Congress reaffirmed the duty of the federal government to American Indians and Alaska Natives (P.L. 110-148), declaring 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."

WHEREAS, the Indian Health Service (IHS), an agency within the Department of Health and Human Services, administers health care to 2.2 million AI/ANs residing in Tribal communities in 35 states, directly (i.e. direct service tribes), or through contracts or compacts with Tribes and Tribal organizations under the Indian Self-Determination and Education Assistance Act; and

WHEREAS, in FY 2013, the IHS budget lost \$220 million due to sequestration in FY 2013. Many sites cut patient visits, furloughed staff and delayed or denied needed medical procedures; and

WHEREAS, when compounded with rising medical inflation and population growth, Indian health budgets are quickly trending backward; and

WHEREAS, without adequate appropriations our people will continue to suffer at higher rates than other Americans from alcoholism, diabetes, suicide, cancer, domestic violence, and other health afflictions; and

WHEREAS, The Supreme Court ruled in *Salazar vs. Ramah Navajo Chapter* (2012) that the federal government must pay Contract Support Costs (CSC) to Tribes regardless of appropriation; and

WHEREAS, In FY 2014, Congress provided a partial pathway forward to fully fund these costs by removing budget-line caps and providing a lump-sum payment up to the agency; and,

WHEREAS, this created a crisis where the funds allocated were not enough to fully fund CSC without drastic cuts to direct health services this unfunded mandate will cost lives in Indian Country;

WHEREAS, full-funding CSC does not mean that the federal government relinquishes its duty to provide health services for AI/ANs, and;

WHEREAS, Indian Country should not be held responsible to pay Contract Support Costs out of their own budgets; and,

WHEREAS, providing direct care to AI/ANs is the primary mission of IHS, and budgets continually fall short of being adequate to ensure care is provided, and;

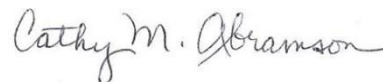
NOW THEREFORE BE IT RESOLVED, that it is the official policy of the National Indian Health Board that the IHS should be fully-funded and that

NOW THEREFORE BE IT RESOLVED, the National Indian Health Board declares a health care crisis in Indian Country; and

BE IT FINALLY RESOLVED, the National Indian Health Board calls on the Administration to recommend and for Congress to enact the Tribal Budget Formulation Workgroup's IHS budget recommendation each year in order to move toward fully funding IHS and ending the health crisis for Indian Country.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 9th day of September, 2014.



Chairperson

ATTEST:

H. Sally Smith.

Recording Secretary