

## National Indian Health Board Resolution 18-11

## SUPPORT FOR FINANCIAL RESOURCES TO PROVIDE TECHNICAL RESOURCES TO FEDERAL/TRIBAL ADVISORY COMMITTEES AND WORKGROUPS

**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, behavioral health and public health services to AI/ANs and for the fulfillment of the Federal government's trust responsibility to AI/AN Tribal governments; and

**WHEREAS**, the NIHB is duly elected to serve 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 policy; and

**WHEREAS,** the Unfunded Mandates Reform Act requires an effective process to permit elected officers of Tribal governments to provide meaningful and timely input in the development of regulatory proposals containing significant federal intergovernmental mandates; and

**WHEREAS,** the Unfunded Mandates Reform Act contains an exemption from the Federal Advisory Committee Act (FACA) for meetings between "federal officials and elected officers of state, local, and tribal governments; and

**WHEREAS**, Executive Order 13175 sets forth clear definitions and frameworks for meaningful Tribal consultation on policies that have Tribal implications that honors the government-to-government relationship between the United States; and

WHEREAS, in 2009, the President issued an Executive Memorandum that directs each Agency to develop a Tribal Consultation Policy and states "History has shown that failure to include the voices of tribal officials in formulating policy affecting their communities has all too often led to undesirable and, at times, devastating and tragic results. By contrast, meaningful dialogue between Federal officials and tribal officials has greatly improved Federal policy toward Indian tribes. Consultation is a critical ingredient of a sound and productive Federal-tribal relationship;" and

WHEREAS, the federal government has numerous Federal/Tribal Advisory Groups, Committees, and Workgroups that are related to Health Care, including but not limited to the Department of Health and Human Services (HHS) Secretary's Tribal Advisory Committee (STAC), the Indian Health Service (IHS) Contract Support Costs Workgroup, the IHS Purchase/Referred Care Workgroup, the IHS Community Health Aide Program Tribal Advisory Group, the IHS Information Systems Advisory Committee, the National Institutes of Health Tribal Advisory Committee; and

**WHEREAS**, in numerous instances when these Federal/Tribal Advisory Groups, Committees, and Workgroups take place, the federal officials will bring their own technical advisors and support staff to the meetings where they rely on them for assistance; and

WHEREAS, Tribal Leaders often are unable to bring their own Technical advisors and support staff to the meetings and often prevented from engaging in meaningful dialogue and discussion, contrary to the intent and principles of Tribal consultation; and

**WHEREAS**, that the NIHB does its best to support these Federal/Tribal Advisory Groups, Committees, and Workgroups by providing on-site technical assistance, issue tracking, notetaking, briefing material, follow-up letters, and information dissemination at no cost; and

**WHEREAS,** the NIHB, a 501(c)3 not for profit, charitable organization, does not have enough resources to provide adequate support to these Federal/Tribal Advisory Groups, Committees, and Workgroups, and

NOW THEREFORE BE IT RESOLVED, the federal government should prove its understanding and commitment to fulfilling the principles underlying Tribal consultation by providing financial support to NIHB for the provision of technical assistance and support to Tribal Leaders on these Federal/Tribal Advisory Groups, Committees, and Workgroups, including but not limited to the Department of Health and Human Services (HHS) Secretary's Tribal Advisory Committee (STAC), the Indian Health Service (IHS) Contract Support Costs Workgroup, the IHS Purchase/Referred Care Workgroup, the IHS Community Health Aide Program Tribal Advisory Group, the IHS Information Systems Advisory Committee, the National Institutes of Health Tribal Advisory Committee.

## **CERTIFICATION**

The foregoing resolution was adopted by the Board, with quorum present, on the 10<sup>th</sup> day of April, 2018.

Vinton Hawley

NIHB Chairperson

**ATTEST:** 

Lisa Elgin

NIHB Secretary