



NATIONAL CONGRESS OF AMERICAN INDIANS

Resolutions Committee Recommendation

Resolution # REN-19-028:

Title: A Call to Congress to Support FY 2020 Indian Health Service Funding

Comments:

This resolution addresses the need to support FY 2020 Indian Health Services. The Resolution is national in scope, however it is not emergency in nature given that NCAI has and continues to advocate for full IHS funding, in addition to advanced appropriations for IHS.

In addition, several of the funding suggestion statements are below what NCAI is advocating for. For example, the resolution states that NCAI recommends program increases of \$420 million, whereas in our Indian Country FY 2020 Budget Recommendation NCAI is advocating \$985 million for program expansions.

Recommendations:

Due to the comments mentioned above, it is recommended by the resolutions committee that this resolution be tabled. NCAI will continue to educate Congress on the importance of increasing appropriations for Indian Health Services in order to provide adequate services to American Indians and Alaska Natives.

Sponsor a member in good standing (yes/no)?: _____



NATIONAL CONGRESS OF AMERICAN INDIANS

The National Congress of American Indians Resolution REN-19-028

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CHIEF EXECUTIVE OFFICER
KEVIN ALLIS
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NCAI HEADQUARTERS
1516 P Street, N.W.
Washington, DC 20005
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TITLE:

WHEREAS, we, the members of the National Congress of American Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants the inherent sovereign rights of our Indian nations, rights secured under Indian treaties and agreements with the United States, and all other rights and benefits to which we are entitled under the laws and Constitution of the United States, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise promote the health, safety and welfare of the Indian people, do hereby establish and submit the following resolution; and

WHEREAS, the National Congress of American Indians (NCAI) was established in 1944 and is the oldest and largest national organization of American Indian and Alaska Native tribal governments; and

WHEREAS, the President's FY 2020 Budget Request for the Indian Health Service (FY 2020 IHS Budget Request) was released on March 11, 2019 and proposes:

- Cuts funding to Community Health Representatives (CHRs) by \$39 million (funded at \$62.8 in FY 2019); and
- Eliminates funding for Health Education (funded at \$20.5 million in FY 2019); and
- Cuts funding to Urban Health of \$2.5 million (funded at \$51.3 million in FY 2019), and
- Cuts funding to Indian Health Professions by \$14 million (funded at \$57.3 million in FY 2019); and
- Eliminates funding for Tribal Management (funded at \$2.4 million in FY 2019), and
- Cuts funding to Self-Governance of \$1 million (funded at \$5.8 million in FY 2019); and
- Cuts funding to Facilities and Environmental Support of \$647 thousand (funded at \$252 million in FY 2019); and

WHEREAS, CHRs, Health Education, Tribal Management, Urban Health, Indian Health Professions, Self-Governance, and Facilities and Environmental Support are critical programs to IHS/Tribes and must be fully funded in FY 2020; and

WHEREAS, annual funding levels to IHS fall short on funding medical inflation and population growth increases, and NCAI has determined that \$195 million is needed to fund medical inflation and population growth for FY 2020; and

WHEREAS, FY 2020 IHS Budget Request proposes funding for new initiatives under Clinical Services that NCAI supports in the amount of \$70 million, as follows:

- Electronic Health Record System (EHR) at \$25 million for activities to be determined through tribal consultation with each Area for successful EHR transformation; and
- Ending the Hepatitis C and HIV/AIDs Epidemic in Indian Country at \$25 million to provide an estimated 1,800 patients with treatment and case management services to prevent and treat Hepatitis C infection due to injection drug use and fund data collection to measure outcomes; and
- CHAP expansion at \$20 million in the lower 48 for activities to be determined through tribal consultation with each Area; and

WHEREAS, NCAI recommends program increases of \$410 million for FY 2020, as follows:

- Dental Services: \$20 million increase to address the growing oral health needs and dental professional shortage in Indian Country; and
- Mental Health - \$152.5 million increase:
 - \$75 million is needed to expand funding for pilot projects for aftercare services for Native youth discharged from residential substance use treatment; and
 - Funding is needed for more YRTCs and tribes to develop approaches to aftercare, recovery, and other support services for Native youth that can be used across other IHS, YRTCs and in tribal communities;
 - \$75 million is needed to expand the Special Behavioral Health Pilot Program for Indians with an option for tribal shares; and
 - \$2.5 million is needed to fund Area Health Boards/Tribal Epidemiology Centers for the provision of technical assistance to tribes and to collect and evaluate Special Behavioral Health Pilot Program; and
- Alcohol and Substance Abuse (and to address the opioid crisis) - \$152.5 million increase:
 - \$25 million is needed to expand Alcohol and Substance Abuse funding for pilot projects for aftercare services for Native youth discharged from residential substance use treatment; and
 - Funding is needed for more YRTCs and tribes to develop approaches to aftercare, recovery, and other support services for Native youth that can be used across other IHS, YRTCs and in Tribal communities;
 - \$75 million is needed to expand the Special Behavioral Health Pilot Program for Indians with an option for tribal shares; and
 - \$2.5 million is needed to fund Area Health Boards/Tribal Epidemiology Centers for the provision of technical assistance to tribes and to collect and evaluate Special Behavioral Health Pilot Program; and
 - \$50 million is needed to fund critical detoxification and recovery services; and
- Purchased and Referred Care (PRC): \$50 million increase to address the significant backlog of deferred services, the growing number of denied services, and CHEF claims; and
- Indian Health Professions: \$10 million to fully fund scholarships for all qualified applicants to the IHS Scholarship Program and to support the Loan Repayment Program to

fund all physicians, nurse practitioners, physician's assistants, nurses and other direct care practitioners; and

- Small Ambulatory Program: \$25 million increase to support the new facility construction needs of smaller tribes who cannot compete in the current new facilities construction priority system; and

WHEREAS, FY 2020 IHS Budget Request is \$5.9 billion and IHS National Tribal Budget Formulation Workgroup's FY 2020 request is \$7 billion to get IHS on track for phased in full funding at \$36.8 billion in 12 years; and

WHEREAS, the federal government has a trust responsibility and treaty obligations to ensure that tribes and AI/AN communities are fully funded to meet their health care and service needs.

NOW THEREFORE BE IT RESOLVED, that the National Congress of American Indians (NCAI) calls on Congress to support funding for the Indian Health Service for Community Health Representatives, Health Education, Urban Health, Indian Health Professions, Tribal Management, Self-Governance and Facilities and Environmental Support in FY 2020 at no less than FY 2019 enacted levels; and

BE IT FURTHER RESOLVED, NCAI calls on Congress to support \$195 million for medical inflation and population growth increases for the Indian Health Service for Services and Facilities (not including Contract Support Costs which is an indefinite appropriation) for FY 2020; and

BE IT FURTHER RESOLVED, NCAI calls on Congress to support \$70 million in funding for new Indian Health Service initiatives as directed by Tribes and Tribal Organizations through tribal consultation, including, Indian Health Service Electronic Health Record System funding at \$25 million, expansion of the Community Health Aide Program in the lower 48 at \$20 million, and ending the Hepatitis C and HIV/AIDs Epidemic in Indian Country at \$25 million; and

BE IT FURTHER RESOLVED, NCAI calls on Congress to support \$410 million in program increases for FY 2020 above FY 2019 enacted level for Dental Services at \$20 million, Mental Health at \$152.5 million, Alcohol and Substance Abuse (and to address the opioid crisis) at \$152.5 million, Purchased and Referred Care at \$50 million, Indian Health Professions at \$10 million, and Small Ambulatory Program at \$25 million; and

BE IT FURTHER RESOLVED, that the National Congress of American Indians calls on Congress to fund Indian Health Service at \$7 billion in FY 2020 to get the Indian Health Service on track for phased in full funding at \$36.8 billion in 12 years; and

BE IT FINALLY RESOLVED, that this resolution shall be the policy of NCAI until it is withdrawn or modified by subsequent resolution.

CERTIFICATION

The foregoing resolution was adopted by the General Assembly at the 2019 Mid-Year Session of the National Congress of American Indians, held at the Nugget Casino Resort, June 24-27, 2019, with a quorum present.

Jefferson Keel, President

ATTEST:

Juana Majel Dixon, Recording Secretary



NATIONAL CONGRESS OF AMERICAN INDIANS

The National Congress of American Indians Resolution # REN-19-028

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TITLE: A Call to Congress to Support FY 2020 Indian Health Service Funding

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WHEREAS, we, the members of the National Congress of American Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants the inherent sovereign rights of our Indian nations, rights secured under Indian treaties and agreements with the United States, and all other rights and benefits to which we are entitled under the laws and Constitution of the United States, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise promote the health, safety and welfare of the Indian people, do hereby establish and submit the following resolution; and

WHEREAS, the National Congress of American Indians (NCAI) was established in 1944 and is the oldest and largest national organization of American Indian and Alaska Native tribal governments; and

WHEREAS, the federal government has a trust responsibility and treaty obligations to ensure that tribes and AI/AN communities are fully funded to meet their health care and service needs; and;

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~~**WHEREAS**, the President's FY 2020 Budget Request for the Indian Health Service (FY 2020 IHS Budget Request) was released on March 11, 2019 and proposed:~~

- ~~• Cuts funding to Community Health Representatives (CHRs) by \$39 million (funded at \$62.8 in FY 2019); and~~
- ~~• Eliminates funding for Health Education (funded at \$20.5 million in FY 2019); and~~
- ~~• Cuts funding to Urban Health of \$2.5 million (funded at \$51.3 million in FY 2019); and~~
- ~~• Cuts funding to Indian Health Professions by \$14 million (funded at \$57.3 million in FY 2019); and~~
- ~~• Eliminates funding for Tribal Management (funded at \$2.4 million in FY 2019); and~~
- ~~• Cuts funding to Self-Governance of \$1 million (funded at \$5.8 million in FY 2019); and~~
- ~~• Cuts funding to Facilities and Environmental Support of \$647 thousand (funded at \$252 million in FY 2019); and~~

WHEREAS, CHRs, Health Education, Tribal Management, Urban Health, Indian Health Professions, Self-Governance, and Facilities and Environmental Support are critical programs to IHS/Tribes and must be fully funded in FY 2020; and

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WHEREAS, the President's FY 2020 Budget Request for the Indian Health Service (FY 2020 IHS Budget Request) was released on March 11, 2019 and proposes:

- Cuts funding to Community Health Representatives (CHRs) by \$39 million (funded at \$62.8 in FY 2019); and
- Eliminates funding for Health Education (funded at \$20.5 million in FY 2019); and
- Cuts funding to Urban Health of \$2.5 million (funded at \$51.3 million in FY 2019); and
- Cuts funding to Indian Health Professions by \$14 million (funded at \$57.3 million in FY 2019); and
- Eliminates funding for Tribal Management (funded at \$2.4 million in FY 2019), and
- Cuts funding to Self-Governance of \$1 million (funded at \$5.8 million in FY 2019); and
- Cuts funding to Facilities and Environmental Support of \$647 thousand (funded at \$252 million in FY 2019); and

~~**WHEREAS**, annual funding levels to IHS fall short on funding medical inflation and population growth increases, and NCAI has determined that \$195 million is needed to fund medical inflation and population growth for FY 2020; and~~

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WHEREAS, FY 2020 IHS Budget Request proposes funding for new initiatives under Clinical Services that NCAI supports in the amount of \$70 million, as follows:

- Electronic Health Record System (EHR) at \$25 million for activities to be determined through tribal consultation with each Area for successful EHR transformation; and
- Ending the Hepatitis C and HIV/AIDs Epidemic in Indian Country at \$25 million to provide an estimated 1,800 patients with treatment and case management services to prevent and treat Hepatitis C infection due to injection drug use and fund data collection to measure outcomes; and
- CHAP expansion at \$20 million in the lower 48 for activities to be determined through tribal consultation with each Area; and

WHEREAS, NCAI recommends funding program ~~increases expansion for IHS services at of \$410-985~~ million for FY 2020, as follows:

- Hospitals & Health Clinics - \$409 million increase; and
- Dental Services - \$20-98 million increase to address the growing oral health needs and dental professional shortage in Indian Country; and
- Mental Health - \$152-5157 million increase; and:
 - ~~\$75 million is needed to expand funding for pilot projects for aftercare services for Native youth discharged from residential substance use treatment; and~~
 - ~~Funding is needed for more YRTPCs and tribes to develop approaches to aftercare, recovery, and other support services for Native youth that can be used across other IHS, YRTPCs and in tribal communities;~~
 - ~~\$75 million is needed to expand the Special Behavioral Health Pilot Program for Indians with an option for tribal shares; and~~

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- ~~\$2.5 million is needed to fund Area Health Boards/Tribal Epidemiology Centers for the provision of technical assistance to tribes and to collect and evaluate Special Behavioral Health Pilot Program; and~~
- Alcohol and Substance Abuse ~~(and to address the opioid crisis)~~ - ~~\$152.5~~123.7 million increase; and:
 - ~~\$25 million is needed to expand Alcohol and Substance Abuse funding for pilot projects for aftercare services for Native youth discharged from residential substance use treatment; and~~
 - ~~Funding is needed for more YRTCs and tribes to develop approaches to aftercare, recovery, and other support services for Native youth that can be used across other IHS, YRTCs and in Tribal communities;~~
 - ~~\$75 million is needed to expand the Special Behavioral Health Pilot Program for Indians with an option for tribal shares; and~~
 - ~~\$2.5 million is needed to fund Area Health Boards/Tribal Epidemiology Centers for the provision of technical assistance to tribes and to collect and evaluate Special Behavioral Health Pilot Program; and~~
 - ~~\$50 million is needed to fund critical detoxification and recovery services; and~~
- Purchased and Referred Care (PRC) ~~÷~~ \$50~~406.9~~ million increase; and
- Public Health Nursing \$21.8 million; and
- Health Education \$19.9 million; and
- Community Health Representatives \$18.8 million; and
- Urban Indian Health \$32.7 million; and ~~to address the significant backlog of deferred services, the growing number of denied services, and CHEF claims; and~~
 - Indian Health Professions ~~÷~~ \$10~~16.1~~ million increase; and
 - Tribal Management Grants - \$146,667; and
 - Direct Operations - \$613,583; and
 - Self-Governance; \$421,500; and
 - ~~to fully fund scholarships for all qualified applicants to the IHS Scholarship Program and to support the Loan Repayment Program to fund all physicians, nurse practitioners, physician's assistants, nurses and other direct care practitioners; and~~
 - ~~Small Ambulatory Program: \$25 million increase to support the new facility construction needs of smaller tribes who cannot compete in the current new facilities construction priority system; and~~

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WHEREAS, FY 2020 IHS Budget Request is \$5.9 billion and the IHS National Tribal Budget Formulation Workgroup's FY 2020 request is \$7 billion to get IHS on track for phased in full funding at \$36.8 billion in 12 years; and.

~~**WHEREAS**, the federal government has a trust responsibility and treaty obligations to ensure that tribes and AI/AN communities are fully funded to meet their health care and service needs.~~

NOW THEREFORE BE IT RESOLVED, that the National Congress of American Indians (NCAI) calls on Congress to support funding for the Indian Health Services for at \$7.03 Billion for FY 2020 to get the IHS on track for phased in full funding at \$36.8 billion in 12 years ~~Community Health Representatives, Health Education, Urban Health, Indian Health~~

~~Professions, Tribal Management, Self Governance and Facilities and Environmental Support in FY 2020 at no less than FY 2019 enacted levels; and~~

BE IT FURTHER RESOLVED, NCAI calls on Congress to support \$~~495-175~~ million for medical inflation and population growth increases for the Indian Health Service for Services and Facilities (not including Contract Support Costs which is an indefinite appropriation) for FY 2020; and

BE IT FURTHER RESOLVED, NCAI calls on Congress to support \$70 million in funding for new Indian Health Service initiatives as directed by Tribes and Tribal Organizations through tribal consultation, including, Indian Health Service Electronic Health Record System funding at \$25 million, expansion of the Community Health Aide Program in the lower 48 at \$20 million, and ending the Hepatitis C and HIV/AIDs Epidemic in Indian Country at \$25 million; and

~~**BE IT FURTHER RESOLVED**, NCAI calls on Congress to support \$410 million in program increases for FY 2020 above FY 2019 enacted level for Dental Services at \$20 million, Mental Health at \$152.5 million, Alcohol and Substance Abuse (and to address the opioid crisis) at \$152.5 million, Purchased and Referred Care at \$50 million, Indian Health Professions at \$10 million, and Small Ambulatory Program at \$25 million; and~~

~~**BE IT FINALLY RESOLVED**, that the National Congress of American Indians calls on Congress to fund Indian Health Service at \$7 billion in FY 2020 to get the Indian Health Service on track for phased in full funding at \$36.8 billion in 12 years.~~

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CERTIFICATION

The foregoing resolution was adopted by the General Assembly at the 2019 Mid-Year Session of the National Congress of American Indians, held at the Nugget Casino Resort, June 24-27, 2019, with a quorum present.

Jefferson Keel, President

ATTEST:

Juana Majel Dixon, Recording Secretary