

Metlakatla Indian Community

P.O. Box 439
Metlakatla, Alaska 99926
907-886-4741

Audrey Hudson, Mayor

Testimony submitted to the House and the Senate Appropriations Subcommittees
on Interior, Environment and Related Agencies

May 16, 2017

The requests of the Metlakatla Indian Community for the FY 2018 Interior, Environment, and Related Agencies budget are as follows:

- Appropriate \$1,000,000 through the BIA Safety of Dams (SOD) program to address the hazard mitigation needs and initial planning phases for improvements at Chester Lake Dam.
- Move forward with full and mandatory funding for Contract Support Costs (CSC).
- Funding for tribal courts in PL 83-280 states.
- Shield IHS funding from sequestration.
- Support for additional funding for Village Built Clinics.

* * *

The Metlakatla Indian Community (MIC) is located on the Annette Island Reserve in southeast Alaska, a land base of 87,000 acres. Through our Annette Island Service Unit we provide primary health services at our outpatient facility through funding from the IHS as a co-signer to the Alaska Tribal Health Compact under the Indian Self-Determination and Education Assistance Act. We have significant fish and forestry resources, but as noted elsewhere in this testimony, we require more resources to fully manage them.

Chester Lake Dam.

Chester Lake is the sole municipal water supply, so maintaining this reservoir is essential to the survival of the Tribe. Measures to secure and improve this water supply are a high priority to Tribal leaders. It is this consideration that led the Emergency Preparedness Task Force to enforce the cessation of hydropower operations from Chester Lake during the extremely low water period from July to September in 2016.

This had the effect of making the Tribe rely more heavily on diesel power generation and the Purple Lake Dam. The Bureau of Indian Affairs (BIA) Safety of Dams Downstream Hazard Classification Study 2016 was performed in summer 2016 to determine if the dam's hazard classification needed to be re-evaluated and to begin potential work to make improvements to this reservoir.

This process is part of the oversight provided by BIA SOD to ensure the safety of dams in Indian Country. *In March 2017, SOD informed MIC that the Chester Lake Dam qualified to have its hazard classification upgraded from low to high hazard*, thereby requiring additional comprehensive evaluation of the Dam, its status and steps to take to prevent any kind of an emergency or hazard to the community health and wellness.

The MIC has determined, through this process, that \$1,000,000 in infrastructure funding is necessary to make safety improvements at Chester Lake Dam, as well as carry out necessary planning and studies for expansion of the dam's storage and hydropower production capacity. The total cost of this project will be approximately \$12 million, but the initial funding will allow for immediate safety measures to be implemented to protect the drinking water supply while planning for the Phase 2 improvements that will increase not only water storage capacity but also expanded hydropower production from Chester Lake Dam.

Contract Support Costs (CSC).

Our great thanks for this Subcommittee's leadership in making funding of IHS and BIA contract support costs (CSC) for FY 2016, and now FY 2017, an indefinite amount and also having made it a separate account in the IHS and BIA budgets. This shift makes an enormous difference in helping ensure that the Indian Self-Determination and Education Assistance Act (ISDEAA) is fully funded and implemented as Congress intended in these two agencies. It also significantly enhances the federal-tribal government-to-government relationship. For IHS, the FY 2017 estimate for contract support costs is \$800 million, and for the BIA it is \$278 million.

Thank you also for listening to tribes who explained why the problematic IHS-supported FY 2016 enacted bill proviso which effectively denied the CSC carryover authority granted by the ISDEAA. We appreciate that this proviso is absent from the Consolidated Appropriations Act for FY 2017.

Our objective, though, continues to be the indefinite appropriation of CSC funding as mandatory and permanent. Full payment of CSC is not discretionary; it is a legal obligation under the ISDEAA, affirmed by the U.S. Supreme Court. Funding of CSC on a discretionary basis has in the very recent past placed the House and Senate Appropriations Committees, in their own words, in the "untenable position of appropriating discretionary funds for the payment of any legally obligated contract support costs." We remain committed to working with the appropriate Congressional committees to determine how best to achieve this objective.

Tribal Court Assistance for Tribes Subject to PL 83-280.

We appreciate the much-needed support in the FY 2017 appropriations bill for tribes who are affected by Public Law 83-280 and who are striving to serve their communities with competent and appropriate judiciary systems.

The FY 2017 Explanatory Language accompanying the Consolidated Appropriations Act, FY 2017 would increase BIA Tribal Justice Support funding for tribes affected by PL 83-280 (first enacted during the early 1950s termination era) who are working to exercise their rightful jurisdiction on domestic violence and other matters, and to increase available remedies and services for crime victims. It is very important for the future of tribal nations affected by PL 83-280 to continue development of robust criminal jurisdiction systems. We quote below the FY 2017 language:

“Funding for Tribal justice support is restored to \$17,250,000, of which not less than \$10,000,000 is to address the needs of Tribes affected by Public Law 83-280. The Committees remain concerned about Tribal court needs as identified in the Indian Law and Order Commission’s November 2013 report, which notes Federal investment in Tribal justice in “P.L. 280” States has been more limited than elsewhere in Indian Country. The Committees expect the Bureau to work with Tribes and Tribal organizations in these states to fund plans that design, promote, sustain, or pilot courts systems subject to jurisdiction under Public Law 83-280. The Bureau is also directed to formally consult and maintain open communication throughout the process with Tribes and Tribal organizations on how this funding supports the technical infrastructure and future Tribal court needs for these jurisdictions.”

Shield IHS Funding From Sequestration.

We have requested in our previous years’ testimony that the IHS budget be protected from sequestration. We again ask this Subcommittee's support of an amendment to the Balanced Budget and Emergency Deficit Control Act to exempt the IHS from sequestration of funds, just as Congress has done for the Veterans Health Administration's health programs. We are very concerned that the current FY 2018 funding cap for non-defense discretionary spending is lower than the FY 2017 spending cap, and when considered along with the President’s “skinny” FY 2018 budget outline proposal, which significantly lowers non-defense discretionary spending, we fear a significant sequestration of funds in FY 2018. IHS funding for health care services should be made exempt from sequestration.

Village Built Clinics.

We thank Congress so much for the \$11 million for tribal health clinic leases in the FY 2017 Consolidated Appropriations bill, and in particular for Senator Murkowski's determination in advocating for these very small clinics which are the health lifeline in rural Alaska villages. We ask everyone to put yourself and your family in the position of living in a tiny, incredibly remote village with no roads and challenging weather and needing the health care that

can be provided by trained community members and the health professionals who rotate in and out of those communities and utilize the small clinics as headquarters. We are also pleased that the House Natural Resources Subcommittee on Indian, Insular, and Alaska Native Affairs hearing on Indian infrastructure needs in Indian Country, with the support and participation of Representative Don Young, included a discussion of the needs of Village Built Clinics. It was an appropriate subject as many of the Village Built Clinics are in disrepair and there is great need for a reserve fund for their upkeep and expansion. In 2015, the Alaska Native Health Board estimated that \$14 million annually was needed to fund a replacement reserve to address the crisis state of the clinics.

We support increased funding for Village Built Clinics and request that the funding be: 1) recurring, 2) a separate line item in the IHS budget, and 3) displayed in the Budget Justification to better enable planning and certainty. The FY 2017 funding is supplemental to the approximately \$4.5 million already being provided to those life-saving small clinics and should be so reflected. In 2015, the Alaska Native Health Board estimated that \$12.5 million was needed in addition to the existing \$4.5 million base. Accordingly, the \$11 million increase in FY 2017 was a major step forward but still does not cover the full amount of need. In addition, without a separate line item for Village Built Clinics, much of the funding could be distributed to other types of facility leases, leaving the Village Built Clinics coming up short.

We are glad to provide any additional information you may request. Thank you for your consideration of the concerns and requests of the Metlakatla Indian Community.