

Committee on Natural Resources

*Oversight Field Hearing: “Examining 50 years of the Indian Self-Determination and Education Assistance Act in Indian Country”*

April 4, 2025

**Questions from Rep. Westerman** for Mr. Mark Rogers, Chief Executive Officer, Osage Nation Health System, Pawhuska, OK

1. Has self-governance led to the revitalization of any cultural practices for your tribe?  
If yes, please elaborate on the impact this has on your people.

**Answer:** Yes; the Osage Nation tribal members also are more involved in their own governance now, which not only provides further employment opportunities to serve the Osage Nation (both in tribal government and with other elected positions to guide their tribe now and into the future), it generates a special “synergy” amongst tribal members that relies on traditions within their culture to traditionally organize, communicate, and interact within cultural norms and traditions of the Osage people. An ability to remain culturally active as a tribal nation to grow and stabilize in both ceremonies, language, and traditions, all vitally important to the Osage people since time immemorial, with traditions handed down from their ancestors, allowing for the Osage people “to be” the Osage Nation. This doesn’t replace the American in Native American, only allows for the identity of the tribe to be embraced and rebirthed within the tribe whilst being full, proud and active citizenry of the United States, often viewing themselves as the “First Americans” as do many other tribes, but also fiercely proud of their warrior culture embedded is centuries of service to the United States military. One such tribal hero was Major General Clarence L. Tinker, born in what was known as Indian Territory in 1887, present day Osage County, Oklahoma, he was the first American Indian in U.S. History to attain the rank of Major General, and unfortunately the first American general to die in World War II. Tinker Air Force Base in Oklahoma City, Oklahoma, is named in his honor. The Osage, and other Native Americans in general, view serving in the United States military as a way to “earn their warrior status” by proudly serving in the U.S. military, and all tribes highly value and honor this service within their various cultures and traditions with highly respected ceremonies and additional honors for those serving in the American Armed Forces. Daposka Ahnkodapi, (Our School in Osage), is a private school serving Osage children from six-weeks through 8th grade that was established by the tribe to strengthen and preserve its language and culture through education. The program also provides before and after school support for working parents who children attend and participate in the program. In our health system, we teach basic greetings and phrases in Osage that has seen a huge increase in the trust and engagement of tribal elders utilizing services and staying engaged in wellness programs and services and programs that promote overall well-being of the tribe.

2. In your written testimony, you described “integrative services” as a “programmatic tapestry, or quilt” that worked to address the needs of the Osage Nation. Elaborate on that analogy and how specifically compacting has benefited the health and well-being of Osage tribe?

**Answer:** Yes, thank you for allowing me to elaborate. I.H.S. and the US Government allowing for compacting with tribes has led to amazing economic growth and enhancements to those tribes who have chosen or been allowed to do so; with I.H.S.’s leadership and assistance, compacting has enhanced several tribe’s ability to react and respond locally with planning and programming specific to the needs, in our case, of the Osage Nation and the community in which we live and serve. Although there are success stories from several compacted tribes, a few examples of the “patches” in our service “quilt” are the following directly related to being compacted:

- Standing up a Specialty Clinic that reduces referral delays for care and access to specialty medical care and services internally, versus seeking care through the community. Neurology, for example, previously took 12-14 months to secure an appointment for a referral for a neurological exam; however, now we are able to bring neurology “in-house” a few days a month, reducing access to just a few weeks now to fulfill a neurology referral. This also reduces the manhours Purchase Referred Care, PRC (formerly call Contract Health) spent searching for services and securing appointments previously; this is all in-house now with these negotiated specialty arrangements and we are able to bill for these services, off-setting the cost of bringing the specialty service in-house as well as the manhour savings of staff refocused on other patient needs and services, making the overall PRC experience smoother and increasing patient satisfaction, patient safety, and patient throughput.
- Ability to choose an Electronic Health Record System that is more current and congruent to healthcare operations, such as EPIC, that data informatics for population health determinants/resource allocation, versus outdated platforms like RPMS, providing better, faster, more focused servicing of our patient population that they can access via MyChart on their mobile devices just like those in the private sector can, giving the tribal patient more control over their health services and care programs.
- Embedding our diabetic grant program within our primary care services to schedule same day diabetic “super appointments” with dental, optometry, our nutritionists, and laboratory testing as well as primary care encounters is another example of leveraging a grant program with our primary care services to aggressively identify, educate, conduct early intervention of newly identified diabetic patients and actively work to manage the disease process early on. My son, we are Cherokee Citizens, recently through this program actually reversed his diabetes and no longer requires medication as a result, greatly increasing his health and wellness, future longevity, and preventing limb amputation his mother and other family members have suffered from with this horrible disease afflicting Indian Country today.
- We utilize our grant programs to link up and interact with primary care and other services like our Title VI Elder Nutrition programs, whereby our Behavioral Health grants and Public Health grants can engage elders and other tribal members with caregiver trainings, teach them how to manage and test their diabetes, blood pressure, recognizing other issues such as

signs and symptoms of heart attack and strokes. We also train and depend upon our grant staff to recognize depression, report loneliness of elders for additional visits with tribal officials and other connections to services, like wheelchair ramps for recent amputees and those infirmed post-surgical procedures, etc.,. Thes other grant programs serve as “early warning” when properly trained, to identify a range of service needs and programs for the Osage people that would not be possible without these grants and additional services provided that connect people “beyond” just coming in for a medical appointment, many times than not because of these important outreach efforts with measured results.

3. In your written testimony, you mentioned the economic benefit the Osage Nation Health System brings to the community, specifically noting the vehicle and equipment purchases made. If Osage Nation was still a direct-service tribe with the Indian Health Service, would these purchases been made, or if so, would they have benefited a company outside of your community?

**Answer:** That is correct; we would have had to also compete with other direct service tribal programs and locations for these assets, equipment purchases or vehicles versus and gone through processes with more complicated budgeting and approval layers versus through our tribal procurement and local approval process, including servicing and support of high dollar purchased assets. We are able to have tighter decision loops which translate into quicker reaction to identified needs being serviced or addressed for our Osage people and programs.

4. Why did the Osage Nation decide to compact services?

**Answer:** The Osage Nation’s decision to compact was sought out to bring more direct accountability in healthcare services and other programs to be truly be a self-determined tribe, accountability being locally managed and overseen by local elected leadership chosen by the tribal peoples, versus being direct services, whereby decisions, complaints, and complicated matters, especially medical matters, took greater coordination and had less consideration within the local tribal needs of Osage Citizens who are directly impacted, but leaving chosen tribal leaders constrained or limited in their ability to direct care and service needs of its citizenry, often carrying cultural and traditional implications on those leaders. Decisions and issues had to be resolved previously with labor intensive advocacy efforts “through the chain of command,” often going all the way Washington D.C., for action or response, taking months and sometimes over a year that could have been addressed locally with the resources and empowerment of tribes via self-governance.

a. What are potential factors that would discourage a tribe from pursuing a self-governance agreement?

**Answer:** I would say fear, fear of the unknown, fear of potentially failing and not being able to recruit or retain the variety of highly skilled specialties I.H.S. provides with the Public Health Corps servicing I.H.S. Direct Service tribes. Some will choose a positive outlook on FEAR, that is to “Face Everything And Rise,” and some will chose a negative outlook on FEAR, that is to “Forget Everything And Run.” Choosing to seek compacting as a tribe is a unique and special

discussion unique to every tribe, there are no cookie cutting approaches I believe. Changing something that is known and familiar versus venturing off into something new and unfamiliar carries risks for tribes. In Indian Country in general, if a tribe “gets it wrong” there are not often second chances provided, historical trauma has shown us that, and every tribe has their own horror story with “getting it wrong;” when a tribe makes a bad decision, they lose money, they lose resources, people suffer or in some cases even die from bad decisions, even their very own culture, language and traditions often suffer as well from collateral damage. Tribes are very deliberate and calculated in what they do, and how they do it as a result, this is why tribal consultations are so vitally important to tribes. The ability to discuss, understand, advocate, educate, and evaluate how major decisions, investments, programs, or other ventured efforts or federal policies or laws will impact Native American peoples have historically had life and death consequences, known and unknown. Tribal histories are full of these examples and these stories. However, I believe Indian Country today has made tremendous strides in “getting it right” and growing and prospering because of self-determination and the help of the Indian Health Service and other institutions making it easier for tribes to make important decisions for their people and their preferred futures.

5. How can the audit process tribal self-governance programs go through be improved?

**Answer:** Tribes have to comply with the Single Audit Act but are often required to pay for this audit due to BIA and I.H.S. funding constraints. Concerns exist about the impacts of the derivative and related costs of these audits with purchasing information systems for accounting and storage of data, archives, and other files for presentation and storage recall to the single audit reviewers who are professionals and require commensurate fees with these auditing services. Stabilized funding to cover these costs that impact tribes’ Indirect Costs or Contract Support Costs (and takes funding away from programs otherwise used for services to tribal members) should be considered to alleviate the additional costs and financial burdens tribes go through to be in compliance with the Single Audit Act requirements.

6. When the Osage Nation began negotiating to take over some healthcare services for your tribe, what was that experience like?

**Answer:** The Osage Nation entered into a self-governance compact with the United States of America nine years ago through the Department of Health and Human Services on October 1, 2016, to provide advantages and benefits in improving health and welfare of the Osage People. Program revenue and income has steadily increased year over year since, allowing for more grants and services to be added and ultimately a new \$50M state of the art super clinic to service the Osage Nation and surrounding communities. Servicing tribes with continuing education and assistance during and after the negotiations is a must. In our experience, we received excellent support throughout the compacting process, but afterwards it “felt like” we were on our own and very little guidance, education, training, and assistance we experienced, leaving the tribe with little “service after the sell” so to speak. Seeking out other compacted tribes for mentoring and assistance was the big difference in us “finding our way” through the other side of the effort.

ISDEAA turns fifty this year. We have seen tremendous success with increased self-governance. Please share how turning to self-determination and self-governance has changed the trajectory of your tribe?

**Answer:** It has been a significant hand up, not a handout, for the improvement of the Osage people, from being allowed to self-governed by democratic processes invaluable to the American Citizen in the cause of freedom, as well as the Native American Tribal member charting the course of destiny for their tribe. It allows for better resource management, better resource allocation, and better health and wellness unilaterally for the Osage people, in health, housing, and education, preparing the Osage for being not only better tribal citizens, but a better citizen overall by participating in the process of governance. The Osage tribe's growth and development in services and with also helping the community over the past decades continues to show that when the Osage tribe does well, the community does as well, making self-governance extremely important to the both the tribal member and the general citizenry of any area(s) such as townships or counties, improving infrastructure, tax revenues from tribal enterprises, as well as education and housing. The ISDEAA has provided tremendous life to the Osage Nation and must continue to exist in its spirit and intent to meet the United States' obligations to its tribal nations now and into the future.