

**Committee on Natural Resources**  
**Subcommittee for Indigenous Peoples of the United States**  
**Remote Oversight Hearing - Cisco**  
**WebEx April 21, 2021**  
**10:00 a.m.**

**Oversight Hearing on “*Infrastructure in Indigenous Communities: Priorities for the American Jobs Plan*”**

**Questions from Rep. Westerman** for Andrew Joseph, Jr., Council Member,  
Confederated Tribes of the Colville Reservation

1. The Colville tribe’s application for IHS Joint Venture construction program was selected in 2020.

Question: While this is undoubtedly good news for the Colville tribe, what other challenges remain?

ANSWER: The Colville Tribes’ business plan to finance the construction of the Omak clinic is based primarily on third party revenue. COVID has reduced that revenue and has impacted our ability to get financing. We have also seen lumber prices nearly double from our initial construction plan, which has increased the overall cost of the project. Those Joint Venture projects that were affected by COVID should also benefit from IHS facilities funding in any infrastructure bill that provides funding for IHS Facility Construction.

2. In your testimony, you call on IHS to work with tribes to update its facility construction methodology.

Question: In your view, what factors should the IHS consider in the development of a new construction methodology?

ANSWER: Any new methodology that is adopted should be flexible and allow for changed circumstances. The problem with the Priority List is that there were so many projects on it that it took decades to build them all with the rate of annual appropriations. Now that there are less than 10 projects remaining, some of which are fully funded, IHS needs to begin working with the Facilities Appropriations Advisory Board to develop recommendations.

3. It is well documented that IHS facilities a myriad of barriers to being able to provide adequate care.

Question: Is housing a barrier for tribes like yours in recruiting health care providers?

ANSWER: Professional housing and housing generally is a significant barrier. Those health care providers that are willing to live in a rural area should expect to have convenient places to live. The Colville Tribes is in the process of building a substance abuse treatment center in the town of Keller and we are actively looking for resources for health providers that the Tribes has hired to live.

We understand that IHS does have construction plans for professional housing but that they are not widely shared with tribal health providers. The Colville Tribes recommends that the Committee direct IHS to provide these resources to tribes that are seeking to construct professional housing.

4. Significant backlogs of healthcare and sanitation facilities construction continue to grow year after year.

Question: If Congress is able provide investment in healthcare and sanitation facilities construction as part of an Infrastructure package, do you think equal weight should be given to facility replacement, or maintenance & repair?

ANSWER: All three should be considered and should be given equal consideration. Many Indian health facilities need upgrades or expansions, which was a longstanding need that was highlighted by the COVID pandemic. Many health facilities, including the Colville Tribes' facilities, lacked isolation units and negative pressure rooms to deal with the influx of COVID patients.