



House Committee on Natural Resources  
Subcommittee for Indigenous Peoples of the United States  
Chairman Raúl M. Grijalva, Chair Teresa Leger Fernandez and Ranking  
Member Don Young

*Question from Chairman Grijalva on H.R. 3496 Urban Indian Health Providers Facilities Improvement Act :*

1. *Your testimony highlights a large number of UIOs in need of facilities and infrastructure upgrades, as well as their unmet needs for new construction to serve patients better.*
  - a. *Currently, are there other funding streams available for UIO renovation or maintenance projects?*

UIOs do not have access to facilities funding under the general IHS budgetary scheme, meaning that there is no specifically allocated federal funding for UIO facilities, maintenance & improvement, sanitation, equipment, among others. In the FY21 budget cycle, IHS was appropriated \$168 million for maintenance and improvement with no dedicated facilities funding to UIOs.<sup>1</sup> The lack of a dedicated funding allocation is a significant parity issue coupled with other components within the I/T/U system where UIOs face ongoing inequities.

For instance, outside of the IHS system, only the 11 Health Resources and Services Administration (HRSA) UIOs can apply for new access point grants.<sup>2</sup> However, these grants are highly competitive and limited, and are only available to organizations proposing a new full-service primary care clinic in addition to other eligibility criteria that drastically narrows how many UIOs and even HRSA UIOs that can even apply.<sup>3</sup> The HRSA grant is not tailored nor widely accessible to UIOs, and certainly not an adequate solution to the extensive facilities funding needs of the 41 UIOs across the U.S. UIOs frequently must rely on capital campaigns and lines of credit in order to make critical infrastructure and construction improvements to their facilities.

Furthermore, UIOs are excluded from the IHS Facilities Appropriation Advisory Board (FAAB) that evaluates facilities policies, recommends changes, and establishes priorities regarding facilities issues. Urban Indians and UIOs are not mentioned in the FAAB charter; FAAB membership consists of “14 individuals that shall be composed of 12 Tribal members

<sup>1</sup> [FY 2022.pdf \(ihs.gov\)](#)

<sup>2</sup> [Policy Assessment 2021 D011 V4.pdf \(mcusercontent.com\)](#)

<sup>3</sup> [https://grants.hrsa.gov/2010/Web2External/Interface/Common/EHBDisplayAttachment.aspx?dm\\_rtc=16&dm\\_attid=57d93056-9c61-4bf8-b051-d9df2c75a1a4](https://grants.hrsa.gov/2010/Web2External/Interface/Common/EHBDisplayAttachment.aspx?dm_rtc=16&dm_attid=57d93056-9c61-4bf8-b051-d9df2c75a1a4) (6)





and 2 IHS members” without any urban representation; and the charter states that FAAB’s scope only provides for Tribal participation in facilities appropriations.<sup>4</sup>

In the 2016 IHS and Tribal Health Care Facilities’ Needs Assessment Report to Congress, UIOs were also excluded. IHICIA requires the Secretary of HHS to submit such a report to the Senate Committee on Indian Affairs and the House Natural Resources Committee every five years to describe “the comprehensive, national, ranked list of all facilities needs for the Service, Indian tribes, and tribal organizations.”<sup>5</sup> The facilities funding needs of UIOs are never mentioned or included in the 19-page report. UIOs were also excluded from the original 2011 report.<sup>6</sup>

H.R. 3496 is an essential parity issue for UIOs that ensures that AI/ANs residing in urban areas continue to have access to high quality, culturally competent health services. We thank the Subcommittee for this QFR follow up to our testimony and urge members to pass this legislative fix and continue to prioritize urban Indian health.

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<sup>4</sup> <https://www.ihs.gov/ihtm/circulars/2015/facilities-appropriations-advisory-board-charter/>

<sup>5</sup> [https://www.ihs.gov/sites/newsroom/themes/responsive2017/display\\_objects/documents/RepCong\\_2016/IHSRTC\\_on\\_FacilitiesNeedsAssessmentReport.pdf](https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/RepCong_2016/IHSRTC_on_FacilitiesNeedsAssessmentReport.pdf)

<sup>6</sup> [https://www.ihs.gov/sites/newsroom/themes/responsive2017/display\\_objects/documents/RepCong\\_2012/474471\\_IHS\\_Facilities\\_Final\\_Report\\_3-22-11\\_640pm.pdf](https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/RepCong_2012/474471_IHS_Facilities_Final_Report_3-22-11_640pm.pdf)

