

**House Committee on Natural Resources  
Subcommittee on Indian and Insular Affairs  
Legislative Hearing on**

- **H.R. 6489 (Rep. Peltola)**, *“Alaska Native Village Municipal Lands Restoration Act of 2023”*
- **H.R. 8942 (Rep. Hageman)**, *“Improving Tribal Cultural Training for Providers Act of 2024”*
- **H.R. 8955 (Rep. Johnson of SD)**, *“IHS Provider Integrity Act”*
- **H.R. 8956 (Rep. Newhouse)**, *“Uniform Credentials for IHS Providers Act of 2024”*

**Questions for the Record  
Responses of Ms. Amber Torres, Interim Chief Operating Officer,  
National Indian Health Board**

*August 12, 2024*

1. ***Would H.R. 8942 impact the hiring or onboarding process for IHS providers, and if yes, what language could be added to the bill to mitigate that concern?***

H.R. 8942 proposes “an annual mandatory cultural training” for “employees of the Service, locum tenens medical providers, health care volunteers, and other contracted employees who work at Service hospitals or other Service units and whose employment requires regular direct patient access” to participate in and complete as a condition of employment. National Indian Health Board (NIHB) fully supports cultural training for such employees of the Indian Health Service (IHS). The question draws a distinction between the hiring and onboarding process. NIHB would recommend that such training not be a condition of hiring which could delay overall hiring for needed roles, but rather be integrated as part of the existing onboarding and/or annual training process to ensure staff are prepared to engage with coworkers and patients.

As written, the bill currently requires the training as part of the annual training process. In any reports related to the bill, it would be important for the Committee to make its intent clear that it seeks to improve the Service’s work and patient environment while not burdening the hiring process.

Further, not all roles may be appropriate for mandatory training, but rather have as an optional module, such as for locum tenens providers who are frequently contracted for emergent staffing needs and must begin work immediately. NIHB would recommend that the list of employees and providers be updated to better reflect the burden such a requirement might impose.

2. ***Please expand from your testimony as to why H.R. 8942, H.R. 8955, and H.R. 8956 should only apply to IHS direct service facilities.***

Policies put forward without an exemption for Tribes or Tribal organizations that enter into Indian Self-Determination and Education Assistance Act (ISDEAA) agreements could result in policies that infringe on Tribal sovereignty and self-determination that were and are the fundamental policy underpinnings of ISDEAA. Certain provisions in the bills would require the IHS to adopt policies or practices that would impact compacting and contracting Tribes and Tribal organizations by increasing managerial oversight requirements on Tribal programs. Without statutory exemption, there would be no apparent shield from the effects of any IHS-adopted policy or practice for Tribes that enter into ISDEAA agreements. For example, the use of the term “Service unit(s)” by definition includes tribal health programs operated by a Tribe or Tribal organization through an ISDEAA agreement therefore if the term is used in a proposed bill, even if that proposed bill also includes an exemption provision for Tribes or Tribal organizations which enter into ISDEAA agreements, the proposed bill still infringes on Tribal sovereignty and self-determination.

Further, Tribes and Tribal organizations which have contracted or compacted have demonstrated that they have improved their conditions through other more innovative approaches and business practices which may be harmed by the imposition of policies adopted by the IHS to address the statutory requirements of these bills. The intent of Tribal self-governance and self-determination is to allow Tribes to better determine and meet the needs of their communities and citizens; by forcing new requirements on Tribes, it would undermine the intent of ISDEAA to allow Tribes to improve their outcomes through self-governance. The issues these bills seek to address are those of the IHS, and have already been largely addressed by Tribes and Tribal organizations operating under ISDEAA agreements.