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CHEROKEE NATION®

P.O. Box 948 • Tahlequah, OK 74465-0948
918-453-5000 • www.cherokee.org

Chuck Hoskin Jr.
Principal Chief
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ᎠᎯᎩᎠ

Bryan Warner
Deputy Principal Chief
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**Submitted Testimony of Chuck Hoskin, Jr., Cherokee Nation Principal Chief
U.S. House Committee on Appropriations
Subcommittee on Interior, Environment, and Related Agencies
March 17, 2026**

Chairman Simpson, Ranking Member Pingree, Chairman Cole, Ranking Member DeLauro, and members of the Interior Appropriations subcommittee:

Osiyo. On behalf of the citizens of Cherokee Nation, I thank you for this opportunity to share some thoughts on the fiscal year 2027 appropriations process. The House Appropriations Committee, when formulating and considering the FY27 Interior Appropriations bill and other spending measures, should:

- Carry out the Administration’s efforts to reduce wasteful Federal spending by **rejecting duplicative funding lines and redundant programs** that fragment Tribal services or undermine effective Tribal systems already in place;
- Ensure the Indian Health Service is properly spending taxpayer resources by **conducting robust oversight of IHS spending decisions and policy actions**, particularly regarding the Purchased and Referred Care (PRC) program and other funding decisions that affect Tribal health systems;
- Exhibit **strong support for the SBA 8(a) Business Development Program**;
- Promote public safety in eastern Oklahoma by **continuing to provide direct funding for the Tribes impacted by the *McGirt* decision**;
- Support Tribal self-governance and Tribal self-determination by **encouraging federal agencies to fully implement laws such as the Indian Self-Determination and Education Assistance Act and the 477 Program (Public Law 102-477)**, which empower Tribal Nations to administer programs efficiently and in accordance with local needs;
- Ensure that federal policies affecting Tribal Nations are developed through **meaningful government-to-government consultation** and respect for Tribal sovereignty.

With a population of more than 475,000, Cherokee Nation is the largest Native American tribe in the United States. Many of our citizens reside on our Treaty-guaranteed land, a 7,000-square-

mile reservation covering 14 counties in northeast Oklahoma. The remainder of our citizens are spread throughout the United States, living in all 435 congressional districts.

We are the economic engine of northeast Oklahoma, employing more than 15,000 people and providing for the safety, health, and comfort of those who live within our reservation boundaries and the communities located on our land. Cherokee Nation and its businesses have a major economic impact, and that impact is not limited to our citizens. We remain steadfast in our commitment to expand our regional economy and help our neighbors improve their quality of life.

This year we will continue making substantial strategic investments that will help Cherokee families become healthier, stronger, and safer. These investments include infrastructure, housing, mental health services, public safety, career readiness programs, and continued expansion of the largest tribally operated health care system in Indian Country.

First, I urge Congress to continue providing strong oversight over the Indian Health Service to ensure that the agency is spending taxpayer resources responsibly and in accordance with congressional intent. One area where this oversight remains particularly necessary is the Purchased and Referred Care (PRC) program.

Over the past year, Cherokee Nation has raised serious concerns regarding the decision by the Indian Health Service to allocate approximately \$5.6 million in PRC funding to the United Keetoowah Band of Cherokee Indians (UKB) to establish a new program within the boundaries of the Cherokee Nation Reservation. This funding decision was made without consultation with Cherokee Nation and without consideration of the comprehensive Tribal health system already serving this region.

Cherokee Nation currently operates the largest tribally run health care system in the country and provides more than two million patient visits each year. Our health system serves all Tribal citizens within our reservation boundaries, including thousands of UKB citizens. In fact, Cherokee Nation Health Services already provides care to more than 2,600 UKB members annually through our existing facilities and referral network.

Creating a duplicative PRC system within the Cherokee Nation Reservation has created confusion for patients and providers, resulted in billing complications and misdirected claims, and undermined the seamless health care network that Cherokee Nation has spent decades building.

The disparity in funding levels further illustrates the problem. The entire Claremore service area within the Cherokee Nation Reservation receives roughly \$7 million in PRC funding to serve more than 100,000 people. By contrast, UKB received \$5.6 million to serve roughly 2,000 individuals. This equates to a per-capita allocation that is many times higher than the funding available to Cherokee Nation's PRC system.

Such disparities undermine the fairness and transparency of federal funding decisions and risk diverting limited federal resources toward duplicative services rather than strengthening existing Tribal health systems that already deliver high-quality care.

Cherokee Nation has also raised concerns regarding the legal authority used to justify this allocation, including reliance on report language tied to an appropriations bill that was never enacted and the use of funds from the Hospitals and Clinics account to supplement the PRC allocation. These actions raise questions regarding statutory authority, appropriations compliance, and precedent for future funding decisions.

For these reasons, I encourage the Subcommittee to continue carefully scrutinizing IHS decisions related to PRC funding and to ensure that future actions affecting Tribal health systems occur only after meaningful consultation with the Tribal governments involved.

Another issue that warrants congressional attention involves the implementation of the Johnson-O'Malley (JOM) program. The modernization of the JOM program expanded eligibility for contractors, and Cherokee Nation supports efforts to ensure Native students have access to educational resources. However, because JOM funding has remained relatively limited while eligibility has expanded, the approval of new contractors within areas already served by Tribal governments could dilute resources available to students currently receiving services.

As the Bureau of Indian Education considers new contractor applications, it is important that the agency ensure that funding decisions are based on transparent verification of student populations and that services are not duplicated in ways that undermine existing Tribal education programs. Any expansion of the JOM program should be accompanied by sufficient appropriations and careful coordination with Tribal governments to ensure that resources are used effectively.

Third, the Small Business Administration's 8(a) Business Development Program has provided significant economic opportunities for Cherokee Nation and countless tribal governments across the country. Today, that program is under attack—undermining economic self-sufficiency and progress Tribes have worked generations to achieve. I urge the committee to express its support for this important program through report language and work with the administration and House and Senate Small Business Committees to ensure Native contractors are not harmed by agency actions.

Fourth, I would like to thank the subcommittee for its continued attention to public safety and justice issues in connection with the historic *McGirt* decision. *McGirt* and the subsequent *Hogner* decision that reaffirmed the continued existence of the Cherokee Nation Reservation—and our exclusive jurisdiction over our land—changed the complexion of law enforcement and criminal justice in eastern Oklahoma. I request that you provide impacted tribes another round of dedicated McGirt-specific funding again in FY27.

Next, I want to emphasize the importance of strengthening Tribal self-determination and self-governance authorities across the federal government.

Programs such as the Indian Self-Determination and Education Assistance Act and the 477 Program have demonstrated that when Tribal Nations are empowered to administer federal programs directly, services improve and resources are used more efficiently. The 477 Program, in particular, allows Tribes to consolidate employment, training, and related federal programs into a single Tribal plan, reducing administrative fragmentation and allowing Tribal governments to coordinate services in ways that better meet the needs of their communities.

Congress should also reaffirm that the 477 Program (Public Law 102-477) is intended to be implemented broadly and flexibly. Federal agencies should default toward inclusion of eligible programs in Tribal 477 plans unless clearly prohibited by statute. We encourage the Subcommittee to reinforce that the Department of the Interior retains final approval authority over Tribal 477 plans and to conduct oversight where agencies unnecessarily restrict Tribal participation.

Cherokee Nation strongly encourages Congress to reaffirm its support for Tribal self-governance and ensure that federal agencies fully implement both the letter and spirit of these laws. Strengthening Tribal self-determination remains one of the most successful federal policies in Indian Country and continues to deliver measurable improvements in health care, education, and economic opportunity.

Lastly, recent proposals to reorganize federal programs affecting Tribal Nations—including potential shifts involving the Departments of Education, Interior, and Labor—underscore why early and meaningful consultation is so important. These types of structural changes can significantly affect how Tribal education, workforce, and self-governance programs are administered and coordinated across the federal government. Because these programs operate within the context of the federal trust responsibility and the Nation-to-Nation relationship, consultation must occur before major decisions are finalized so that Tribal leaders can meaningfully inform implementation. In this instance, consultation was initiated only after key elements of the reorganization had already been announced, which limited the ability of Tribal Nations to provide meaningful input. Ensuring consultation occurs early in the policy development process will help avoid unintended disruptions to Tribal programs and uphold the government-to-government relationship that federal law requires.

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