

National Indian Health Board



National Indian Health Board Resolution 14 – 03

WHEREAS, the Federal government of the United States has a unique and special relationship with American Indians and Alaska Natives (AI/ANs) to provide health care as established through the U.S. Constitution Treaties with Indian Tribes, U.S. Supreme Court decisions and Federal legislation; and

WHEREAS, although the trust relationship requires the Federal government to provide for the health and welfare of Tribal nations, the Indian Health Service (IHS) remains chronically underfunded at only 56 percent of need, and American Indians and Alaska Natives suffer from among the lowest health status nationally; and

WHEREAS, the Indian Health Service, an agency within the Department of Health and Human Services, administers health care to 2.2 million AI/ANs residing in Tribal communities in 35 states, directly, or through contracts or compacts with Tribes and Tribal organizations under the Indian Self-Determination and Education Assistance Act ; and

WHEREAS, in recent years, Federal appropriation bills have not been enacted in a timely manner, thus hampering Tribal and IHS health care providers' budgeting, recruitment, retention, provision of services, facility maintenance, and construction efforts; and

WHEREAS, since Fiscal Year 1998, there has only been one year (FY2006) in which the Interior, Environment and Related Agencies Appropriations bill has been enacted before the beginning of the new fiscal year; and

WHEREAS, the budgetary solution to this failure to uphold the Federal trust responsibility, and the one which does not require the Congressional appropriations committees to count Advanced Appropriations against their spending cap is Advanced Appropriations; and

WHEREAS, National Indian Health Board believes that moving to the Advanced Appropriations process protect the Tribes and the IHS direct service units from cash flow problems that regularly occur at the start of the Federal fiscal year due to delays in enactment of annual appropriations legislation; and

WHEREAS, Congress has recognized the difficulties inherent in the provision of direct health care that relies on the appropriations process and traditional funding cycle through enactment of the Veterans Health Care Budget Reform and Transparency Act of 2009 (PL 111-81), which authorized Advanced Appropriations for Veterans Administration (VA) medical care programs; and

WHEREAS, the IHS should be afforded the same budgetary certainty and protections extended to the VA which is also a federally-funded provider of direct health care; and

NOW THEREFORE BE IT RESOLVED, that National Indian Health Board requests that Congress amend the Indian Health Care Improvement Act to authorize Advanced Appropriations; and

BE IT FURTHER RESOLVED, that National Indian Health Board requests that Congress include our recommendation for IHS Advanced Appropriations in the Budget Resolution; and

AND BE IT FINALLY RESOLVED, National Indian Health Board requests that Congress include in the enacted appropriations bill IHS Advanced Appropriations.

CERTIFICATION

The foregoing resolution was adopted by the Board, with quorum present, on the 7th day of September, 2014.

Cathy M. Abramson

Chairperson

ATTEST:

H. Sally Smith

Recording Secretary