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National Title VI Grantees Association

NATIONAL INDIAN COUNCIL ON AGING Resolution #2016 – 02

TITLE: NICOA Elders Support the NIHB Budget Recommendations on the Indian Health Service Fiscal Year 2018 Budget

WHEREAS, we the members of the National Indian Council on Aging, Inc. (NICOA) of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants the inherent sovereign rights of our Indian nations, rights secured under Indian treaties and agreements with the United States, to enlighten the public toward a better understanding of the issues and needs of American Indian and Alaska Native Elders, to preserve Indian cultural values, and otherwise promote the health, safety and welfare of our Elders, do hereby establish and submit the following resolution; and

WHEREAS, NICOA was established in 1976 by Tribal Leaders to advocate for improved comprehensive health, social services and economic wellbeing for American Indian and Alaska Native (AI/AN) Elders; and

WHEREAS, AI/AN Tribes are sovereign entities and have a unique government to government relationship with the federal government. This relationship was originally established in treaties, the U.S. Constitution, and other laws which acknowledged the obligation of the federal government to provide health care for AI/ANs; and

WHEREAS, most AI/AN Elders rely exclusively on the Indian Health Service (IHS) for their health care; and

WHEREAS, On December 28, 2010, Chairman of the Committee on Indian Affairs, Senator Byron Dorgan issued a report titled: "In Critical Condition: The Urgent Need to Reform the Indian Health Service's Aberdeen Area" the report states: "...the Chairman identified deficiencies in management, employee accountability, financial integrity, and oversight of IHS Aberdeen Area facilities. The Chairman determined that these weaknesses have contributed to reduced access and quality of health care services available to patients served in the Area." The findings show that: "These issues impact overall access and quality of health care services provided to Native American patients in the Aberdeen Area. Many of these issues may stem from a greater lack of oversight by the Area office and IHS headquarters fostering an environment where employees and management are not held accountable for poor performance." and

WHEREAS, in the report titled "A Quiet Crisis: Federal Funding and Unmet Needs in Indian Country", one expert stated that "...IHS operates with an estimated 59 percent of what it needs to provide adequate health care." The federal government spends less per capita on Native American health care than on any other group for which it has this responsibility, including Medicaid recipients, prisoners, veterans, and military personnel. "; and

WHEREAS, the IHS sponsors the Federal Disparity Index (FDI) Workgroup which measures gaps in health care funding for AI/AN people. This index illustrates disparities in funding and helps assess unmet needs; and

WHEREAS, the Quiet Crisis report created a list of IHS programs within the Department of Health and Human Services that have not been adequately funded. These include: Health facility construction and renovation, Urban health programs, Contract health services, Preventive health, Sanitation services, Health professional training; and

WHEREAS, the National Indian Health Board (NIHB) provides technical support to the Indian Health Service (IHS) Tribal Budget Workgroup as they develop budget priorities that reflect the needs of tribes across Indian Country.

NOW THEREFORE BE IT RESOLVED, the NICOA Elders support the NIHB budget recommendations on the Indian Health Service fiscal year 2018 budget. These recommendations include: fully funding IHS at \$30.8 billion phased in over 12 years, increase the President's FY 2017 budget request for the IHS by a minimum of 37% (\$7.1 billion) in FY 2018, provide dedicated funding to begin implementing provisions of the Indian Healthcare Improvement Act, including funding provisions for long term services and supports, advocate that tribes and tribal programs be permanently exempt from sequestration, and support advance appropriations for IHS.

BE IT FURTHER RESOLVED, NICOA Board of Directors will commit themselves to ensuring health care funding becomes an important priority and to working for coordination between federal agencies and improving services for our Elders.

AND BE IT FURTHER RESOLVED that this resolution shall be the policy of NICOA until it is withdrawn or modified by subsequent resolution.

CERTIFICATION

I hereby certify that the above resolution was passed before a duly called meeting of the National Indian Council on Aging membership on 14, September, 2016, in Niagara Falls, NY, at which a quorum was present.

Chairman

Eddie I Tullis