



**NORTHWEST
PORTLAND
AREA
INDIAN
HEALTH
BOARD**

Burns-Paiute Tribe
Chehalis Tribe
Coeur d'Alene Tribe
Colville Tribe
Coos, Suislaw &
Lower Umpqua Tribe
Coquille Tribe
Cow Creek Tribe
Cowlitz Tribe
Grand Ronde Tribe
Hoh Tribe
Jamestown S'Klallam Tribe
Kalispel Tribe
Klamath Tribe
Kootenai Tribe
Lower Elwha Tribe
Lummi Tribe
Makah Tribe
Muckleshoot Tribe
Nez Perce Tribe
Nisqually Tribe
Nooksack Tribe
NW Band of Shoshoni Tribe
Port Gamble S'Klallam Tribe
Puyallup Tribe
Quileute Tribe
Quinault Tribe
Samish Indian Nation
Sauk-Suiattle Tribe
Shoalwater Bay Tribe
Shoshone-Bannock Tribe
Siletz Tribe
Skokomish Tribe
Snoqualmie Tribe
Spokane Tribe
Squaxin Island Tribe
Stillaguamish Tribe
Suquamish Tribe
Swinomish Tribe
Tulalip Tribe
Umatilla Tribe
Upper Skagit Tribe
Warm Springs Tribe
Yakama Nation

527 SW Hall
Suite 300
Portland, OR 97201
☎ (503) 228-4185
FAX (503) 228-8182
www.npaihb.org

Resolution #07-01-03

**Support for Tribally-operated programs carrying out
Federal functions to receive federal employee benefits**

WHEREAS, the Northwest Portland Area Indian Health Board (NPAIHB) is a Tribal organization under P.L. 93-638 that represents forty-three federally recognized Tribes in Idaho, Oregon, and Washington and is dedicated to assisting to promoting the health needs and concerns of Indian people in the Northwest; and

WHEREAS, the Northwest Portland Area Indian Health Board is dedicated to assisting and promoting the health needs and concerns of Indian people; and

WHEREAS, the primary goal of the NPAIHB is to improve the health and quality of life of its member Tribes; and

WHEREAS, the Indian Self-Determination and Education Assistance Act (ISDEAA) of 1975 allows Tribes to assume Federal functions that were previously the responsibility and carried out by the Federal government; and

WHEREAS, Tribal Self-Determination has alleviated the effects of prolonged Federal domination of Indian service programs and allowed Tribal governments to develop and tailor programs that address and meet the needs of their specific Tribal communities; and

WHEREAS, as Tribes have assumed these Federal functions they have continually not been provided adequate funding to cover the costs of Contract Support Costs and Indirect Costs like other contractors within the Federal government; and as Tribal governments have assumed these programs they should be provided the same rights and privileges as other government contractors and the Federal government when carrying out these functions; and

WHEREAS, Tribal governments carrying out Federal functions have been forced to purchase expensive workers compensation, health insurance, retirement benefits, and other fringe benefits, while Federal employees carrying out those same functions on behalf of Tribes have these costs borne by the Federal government and need not obtain such private insurance; and

WHEREAS, these costs may sometimes be duplicative and because of the expense has resulted in a diminution of goods and services to American Indian and Alaska Native people and cost the Federal government and U.S. taxpayers more money than they should be paying; and

WHEREAS, through Public Law 101-512 Tribal employees acting within their scope of employment in carrying out Federally-authorized programs under Self-

Governance compacts are deemed to be employees of the Bureau of Indian Affairs (BIA) and the Indian Health Service (IHS) for the purpose of Federal Tort Claims Act coverage; and

WHEREAS, to more fully recognize the vital role of Tribal employees in carrying out Tribal Self-Governance compact programs, functions, services, and activities, Tribal employees must be deemed employee status of the BIA and IHS with respect to the Federal Employment Compensation Act and the Federal Employees Benefits provisions at Title 5, U.S. Code; and

WHEREAS, the U.S. Code (Chapter 89, Title 5) authorizes the Office of Personnel Management to enter into contracts with carriers who provide, pay for, or reimburse the costs of health services under group insurance policies or contracts that directly benefit Federal employees carrying out functions on behalf of Tribes; and

WHEREAS, federal laws encourage Tribal insurance to provide medical coverage (P.L. 94-437, Title II, §206) however without adequate Federal funding or the ability to participate in lower cost health insurance contracts negotiated by the Office of Personnel Management, Tribal Self-governance contractors are subject adverse insurance practices and pay abnormally high insurance premiums for employees carrying out inherent Federal functions thereby costing the U.S. Government more money than necessary to carry out its functions.

NOW THEREFORE BE IT RESOLVED, that the Northwest Portland Area Indian Health Board hereby supports that Tribally-operated programs carrying out Federal functions qualify to receive federal employee benefits packages when carrying out functions which the United States would otherwise perform on behalf of Indian Tribes so that Tribal employees receive the same benefits as federal employees when carry out the same functions on behalf of Tribal governments.

BE IT FURTHER RESOLVED, that the Northwest Portland Area Indian Health Board supports introduction and passage of the attached bill to carry out the objectives of this resolution.

CERTIFICATION

NO. 07-01-03

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 25 for, _____ against, 1 abstain on October 19, 2006.

Linda Hill
Chairman

10/19/2006
Date

Stella M. Washines
Secretary