



**RESOLUTION # 07- 04- 06  
NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD**



**RESOLUTION # 250- 07- 07  
CALIFORNIA RURAL INDIAN  
HEALTH BOARD**

## **JOINT RESOLUTION**

### **Support for an Area Distribution Fund in the New HFCPS and Recommend the IHS Director to Implement the new Priority System**

- WHEREAS,** the Northwest Portland Area Indian Health Board (NPAIHB) is a tribal organization under P.L. 93-638 that represents 43 Federally-recognized Indian tribes in Oregon, Washington and Idaho and is dedicated to assisting and promoting the health needs and concerns of Indian people in the Northwest; **AND**
- WHEREAS,** the California Rural Indian Health Board, Inc. (CRIHB), founded in 1969 for the purpose of bringing back health services to Indians of California; is a tribal organization in accordance with Public Law 93-638, is a statewide tribal health organization representing 36 Federally recognized tribes in 21 counties through its membership of 11 Indian Health Programs throughout California's Indian Country; **AND**
- WHEREAS,** the NPAIHB and CRIHB are dedicated to assisting and promoting the health needs and concerns of Indian people; **AND**
- WHEREAS,** the primary goal of the NPAIHB and CRIHB is to improve the health and quality of life of its member tribes; **AND**
- WHEREAS,** The American Indian and Alaska Native population benefit from a unique trust relationship with the United States government as established in the US Constitution and Federal Court decisions federal law and government to government treaties; **AND**
- WHEREAS,** the FY 2000 Interior Appropriations Act directed the Indian Health Service (IHS) to work closely with the tribes and the Administration to make needed revisions to the Health Facilities Construction Priority System (HFCPS) so that the revised system addresses the health facilities construction needs of all American Indian and Alaska Native communities; **AND**
- WHEREAS,** on October 15, 2004 (four years after Congress directed the Agency to revise its HFCPS), the IHS Director circulated for public comment a proposed draft of the new HFCPS which will be used to assess and prioritize future facilities construction needs for IHS and Tribally-operated health programs in which there; **AND**
- WHEREAS,** there were over 1,200 comments received from Tribes and Tribal organizations expressing their dissatisfaction with the newly proposed HFCPS priority system with many comments indicating that the system allocates a disproportionate share of resources to a select few Tribal communities that results in gaps in the level of health services provided to AI/AN people nationwide; **AND**

**WHEREAS,** the IHS Facilities Appropriations Advisory Board (FAAB) appointed a Technical Work Group (TWG) to address the 1,200 comments and develop recommendations for revising the new HFCPS which were transmitted to the IHS Director on July 21, 2005, **AND**

**WHEREAS,** one of the recommendations for the new priority system was the establishment of an Area Distribution Fund for facilities construction projects within each IHS Area to be annually funded by the Congress and would provide a staffing and equipment package similar to those projects that are built under the current HFCPS; **AND**

**WHEREAS,** the Area Distribution Fund was unanimously supported by all twelve of the FAAB representatives that worked to develop the new priority system and would bring a level of equity to the manner in which health facilities construction resources are allocated within the IHS system so that those Areas that do not benefit under the current construction priority system may receive valuable resources to address construction projects in their respective Areas; **AND**

**WHEREAS,** the establishment of an Area Distribution Fund is supported by the Alaska, Bemidji, California, Nashville, Oklahoma, and Portland Areas and by the National Indian Health Board, the Tribal Self-Governance Advisory Committee, and the National Council on Urban Indian Health; the entities combined represent over 400 federally recognized Tribes and span over 40 different states; **AND**

**WHEREAS,** the HFCPS and facilities construction issues are being discussed in the 110<sup>th</sup> Congress in part due to IHS' indecisiveness to respond to the Congressional directive and to finalize the new priority system; **AND**

**WHEREAS,** the funding for recruitment and retention of health care professional staff is a vital part of increasing access to care and without sufficient funding tribal programs can not be as competitive in hiring competent, and experienced staff; **AND**

**WHEREAS,** having competent and experienced staff is vital to improving the quality of the delivery of care.

**THEREFORE BE IT RESOLVED:** CRIHB and the NPAIHB urge the IHS Director to include an Area Distribution Methodology as a component of the new Health Facilities Construction Priority System (HFCPS) and including funds for the provision of sufficient staff to operate the facility.

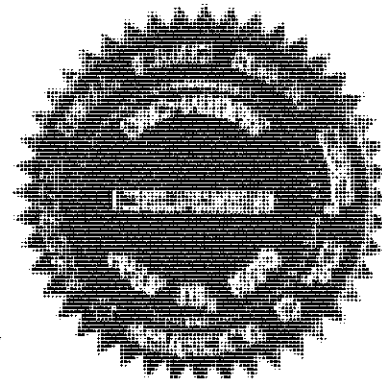
**BE IT FURTHER RESOLVED,** that is has been over seven years since the Congress directed the IHS to revise its facilities construction priority system; and over two years since the FAAB submitted their recommendations to the IHS Director. CRIHB and the NPAIHB strongly urge the IHS Director to make a decision to finalize the HFCPS as soon as possible so that it does not disrupt the passage of the IHCA in the 110<sup>th</sup> Congress.

### CERTIFICATION

The foregoing joint resolution was adopted at a duly called regular joint meeting of the Board of Directors of Northwest Portland Area Indian Health Board and California Rural Indian Health Board (*NPAIHB vote 27 For and 0 Against and 0 Abstain; CRIHB vote 18 For and 0 Against and 0 Abstain*) held this 26<sup>th</sup> day of July 2007 in Reno, Nevada and shall remain in full force and effect until rescinded.

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*Spink Holt*

Chairperson of the Board

*Barbara K. Bird*

Chairperson of the Board

*Stella M. Westnes*

Attest

*Cheri Thoms*

Attest