

IHS TRIBAL SELF-GOVERNANCE ADVISORY COMMITTEE

c/o Self-Governance Communication and Education

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November 12, 2009

The Honorable Byron Dorgan
Chairman
Senate Committee on Indian Affairs
U.S. Senate
838 Hart Senate Office Building
Washington, DC 20510

Re: S. 1790, Indian Health Care Improvement Reauthorization and Extension Act of 2009

Dear Chairman Dorgan:

On behalf of the Tribal Self-Governance Advisory Committee (TSGAC), representing 329 Self-Governance Tribes in the Indian Health Service (IHS), we would like to thank you for your continued commitment to address the unfulfilled need for Indian health legislation. We appreciate the introduction of S. 1790, the Indian Health Care Improvement Act Reauthorization and Extension Act of 2009 (IHCIA), by you and the eighteen co-sponsors, to once again seek to pass this legislation. We ask that as you begin work on this legislation, to please give consideration to the IHCIA reauthorization language that was included in H.R. 3962, the Affordable Health Care for American Act which passed the House on November 7th. In doing so, the SCIA will eliminate consuming time on provisions that have been vetted in Indian Country and addressed by the 437 National Steering Committee.

During the TSGAC Quarterly meeting held in Washington, DC last week, we discussed *Section 131, Contract Health Service Disbursement Formula (CHS)* which requires the IHS to undertake a rulemaking proceeding, using negotiated rule-making procedures, to establish a distribution formula for the Contract Health Services program within the IHS. The TSGAC would like to recommend deleting this provision or at the very least to revise it to include a "*hold harmless funding clause*". Funding allocations in the IHS system for CHS are very complicated and must be balanced with the availability of other resources that come from the hospitals and clinics budgeted line items.

As previously stated above, there are 329 IHS Self-Governance Tribes representing nearly every IHS area. Self-Governance Tribes in CHS dependent areas do not have inpatient or specialty care available and must purchase these services from the private sector requiring them to receive a higher percentage of CHS funds. In contrast, Self-Governance Tribes in areas that have inpatient and specialty care hospitals receive a higher percentage of the IHS budget line item for Hospitals and Clinics. Section 131 would require undue altering of this process at a time when the appropriations are limited and allocations are a moving target. Further, it would unfairly impact health funding and put Tribal interests in competition with one another. There is nothing to be gained from such conflict and we ask that the Committee not initiate such strife among the Tribes. Therefore, we request to delete Section 131.

For more than a decade, we have remained optimistic that the efforts of so many for so long would come to fruition and Indian people would have health care comparable to that of other Americans. Little did we realize that not only are Indian people suffering due to the lack of adequate health care, but so are millions of other Americans. We applaud the work of the Senate Committee on Indian Affairs to address the Reauthorization of the Indian Health Care Improvement Act during the discussions on national health care reform to accommodate the health needs of all Americans.

The TSGAC looks forward to working with the SCIA and staff and we offer the assistance and support of our Tribal Leaders and our technical staff. If you have any further questions, please do not hesitate to contact me at (580) 436-7232; or via email: lt.gov@chickasaw.net Thank you.

Thank you.

Sincerely,



Jefferson Keel,
Lt. Governor, Chickasaw Nation
Chairman, Tribal Self-Governance Advisory Committee

Cc: Honorable John Barrasso, Vice-Chairman, SCIA
Honorable Mark Begich
Honorable Ronald Burris
Honorable Mike Crapo
Honorable Daniel K. Inouye
Honorable Amy Klobuchar
Honorable Patty Murray
Honorable Debbie Stabenow
Honorable Mark Udall
Honorable Sheldon Whitehouse
437 National Steering Committee
National Congress of American Indians

Honorable Daniel Akaka
Honorable Michael F. Bennet
Honorable Kent Conrad
Honorable Al Franken
Honorable Tim Johnson
Honorable Lisa Murkowski
Honorable Harry Reid
Honorable Jon Tester
Honorable Tom Udall
TSGAC Membership
National Indian Health Board