**Legislative Committee Report**

**April 16, 2019**

Attendees: Cheryle Kennedy (Grande Ronde), Greg Abrahamson (Spokane), Kay Culbertson (Cowlitz), Gerald Hill (Klamath), and Andy Joseph, Jr. (Colville)

Staff: Joe Finkbonner, Laura Platero, and Sarah Sullivan

The Committee considered the four resolutions specific to NPAIHB grant applications and opportunities:

**1. Native Boost Research to Improve Native American Health (R21)**

This resolution endorses and supports staff of theNorthwest Tribal Epidemiology Center (NWTEC),under guidance of the Executive Director, to submit a grant application to the National Institute on Minority Health and Health Disparities (NIMHD) requesting funding for the initiative entitled “Native Immunization Boost”.

**2. Support of Northwest Tribal Epidemiology Center Application for Good Health and Wellness in Indian Country (CDC-RFA-DP19-1903)**

This resolution endorses and supports the application of the Northwest Tribal Epidemiology Center (NWTEC), under the guidance of the Executive Director, for the Centers for Disease Control and Prevention (CDC) Good Health and Wellness in Indian Country Initiative (CDC-RFA-DP19-1903).

**3. Ford Family Foundation Children, Youth, and Families Grant Opportunities to Expand Dental Health Teams in Oregon**

This resolution endorses and supports efforts by NPAIHB staff, under the guidance of the Executive Director, to apply for the open Children, Youth and Families grants opportunities through the Ford Family Foundation to expand dental health teams in Oregon.

**4. “OREGON DENTAL ACCESS CAMPAIGN”-- Northwest Health Foundation Policy and Systems Change Grant Invitation**

This resolution endorses and supports efforts by NPAIHB staff, under the guidance of the Executive Director, to apply for the grant opportunity for Policy and Systems Change with the Northwest Health Foundation in response to the invitation to apply from the Northwest Health Foundation.

Action: Motion by Spokane; second by Klamath; and unanimous vote to pass the four resolutions to the Board for consideration.

The Committee then reviewed and discussed the FY 2020 NPAIHB IHS budget analysis tables, new initiatives, and program increases requests and also considered a resolution with specific requests. **Resolution is titled, A CALL TO CONGRESS TO SUPPORT FY 2020 INDIAN HEALTH SERVICE FUNDING.**

This resolution calls on Congress to Support:

* Funding for the Indian Health Service for Community Health Representatives, Health Education, Urban Health, Indian Health Professions, Tribal Management, Self-Governance and Facilities and Environmental Support in FY 2020 at no less than FY 2019 enacted levels; and
* $195 million for medical inflation and population growth increases for the Indian Health Service for Services and Facilities (not including Contract Support Costs which is an indefinite appropriation) for FY 2020; and
* $70 million in funding for new Indian Health Service initiatives as directed by Tribes and Tribal Organizations through tribal consultation, including, Indian Health Service Electronic Health Record System funding at $25 million, expansion of the Community Health Aide Program in the lower 48 at $20 million, and ending the Hepatitis C and HIV/AIDs Epidemic in Indian Country at $25 million; and
* $360 million in program increases for FY 2020 above FY 2019 enacted level for Dental Services at $20 million, Mental Health at $102.5 million, Alcohol and Substance Abuse at $152.5 million, Purchased and Referred Care at $50 million, Indian Health Professions at $10 million, and Small Ambulatory Program at $25 million.
* $7 billion for IHS in FY 2020 to get IHS on track for phased in full funding at $36.8 billion in 12 years.

The Committee asked that the Mental Health line item request be increased by $50 million so that it is equal to the Alcohol and Substance Abuse request.

Action: Motion by Spokane; second by Colville; and unanimous vote to pass the resolution to the Board for consideration.

Committee further requested that language be added to NPAIHB’s FY 2020 IHS budget analysis that requests that a cost report be done for Youth Regional Treatment Centers so they can receive an inpatient rate for services.

In addition, related to FY 2019 Omnibus directives to Congress, Committee recommended that NPAIHB provide recommendations to IHS related to: (1) Health Care Facilities Construction gap analysis; and (2) Demonstration Projects criteria report being prepared for Congress which could fund Regional Referral Specialty Centers. IHS must complete reports within 180 days of enactment of the Omnibus (prior to mid-August).