



NPAIHB

Member Tribes of
the Northwest
Portland Area
Indian Health
Board:

Burns Paiute Tribe
Chehalis Tribe
Coeur d'Alene Tribe
Colville Tribe
Coos, Siuslaw & 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
Klallam Tribe
Lummi Tribe
Makah Tribe
Muckleshoot Tribe
Nez Perce Tribe
Nisqually Tribe
Nooksack Tribe
N.W. Band of
Shoshoni Tribe
Port Gamble S'Klallam
Tribe
Puyallup Tribe
Quileute Tribe
Quinalt 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

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RESOLUTION # 21-03-12

“Option to Exclude All One-Time, Non-Recurring COVID-19 Funds from Direct Cost Base When Negotiating New Indirect Cost Rate”

WHEREAS, the Northwest Portland Area Indian Health Board (hereinafter “NPAIHB” or the “Board”) was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

WHEREAS, the Northwest Portland Area Indian Health Board is a “tribal organization” as defined by the Indian Self-Determination and Education Assistance Act (P.L. 93-638 seq. et al) that represents forty-three federally recognized tribes in the states of Idaho, Oregon, and Washington; and

WHEREAS, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USCS § 450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; 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, American Indian/Alaska Native (AI/AN) people have been disproportionately impacted by COVID-19 with significantly higher rates of COVID-19 cases (3.5x), hospitalizations (5.3x), and deaths (1.8x) than non-Hispanic whites; and

WHEREAS, Tribes and Tribal Organizations that enter into contracts and compacts with the United States government operate programs funded under the Indian Self-Determination and Education Assistance Act are required to negotiate with the Secretary of Health and Human Services or other federal agencies an indirect cost rate for administrative costs associated with carrying out their contractual requirements; and

WHEREAS, Tribes and Tribal Organizations have received a historical level of one-time, non-recurring funding in Fiscal Years 2020 and 2021 to respond to the COVID-19 pandemic in order to help mitigate the health and economic impacts during this public health emergency; and

WHEREAS, the impact of such a large influx of one-time, non-recurring funding can destabilize and drive down indirect cost rates that are negotiated with the federal government in future years, and result in a decreased amount of contract support costs (CSC) payments provided to Tribes and Tribal Organizations in future years; and

WHEREAS, Treasury guidance explains that Tribes and Tribal Organizations may not apply their indirect cost rates to Coronavirus Relief Fund amounts, while at the same time such funds will significantly expand a tribal program's direct cost base—this will cause tribal indirect cost rates to drop (and therefore CSC payments to decrease) unless both the direct and indirect pool amounts increase proportionately; and

WHEREAS, this will result in large swings in CSC payments made to Tribes and Tribal Organizations when their indirect cost rates are driven down by COVID-19 funds and when indirect cost rates swing back up in future years without the COVID-19 funding; and

WHEREAS, this will wreak havoc on ISDEAA contractors who rely on CSC payments to support the administrative costs in carrying out their contractual requirements with the United States government.

THEREFORE, BE IT RESOLVED that the Northwest Portland Area Indian Health Board calls on the Indian Health Service and Office of Management and Budget to issue instructions permitting Tribes and Tribal Organizations to exclude all one-time, non-recurring COVID-19 funds from their direct cost base when negotiating new indirect cost rates; and

BE IT FURTHER RESOLVED, that the Northwest Portland Area Indian Health Board calls on the Indian Health Service to convene the Contract Support Costs (CSC) Workgroup to update its Indian Health Manual, Part 6 – Services to Tribal Governments and Organizations, Chapter 3 – Contract Support Costs (CSC), also referred to as the “CSC policy” to develop a provision to address such one-time funding anomalies on a permanent basis.

CERTIFICATION

The foregoing resolution was adopted by the Board of Directors at the April Quarterly Board Meeting, held virtually April 20, 2021 – April 22, 2021, with a quorum present.



Nickolaus D. Lewis
Chair, Northwest Portland Area Indian Health Board
Councilman, Lummi Indian Business Council

ATTEST:

A handwritten signature in cursive script, appearing to read "Greg Abrahamson", written in black ink.

Greg Abrahamson, NPAIHB Secretary