

AI/AN Health Partners

December 7, 2021

The Honorable Chellie Pingree
Chairwoman
Subcommittee on Interior, Environment,
and Related Agencies
B-308 Rayburn House Office Building
Washington, DC 20515

The Honorable David Joyce
Ranking Member
Subcommittee on Interior, Environment,
and Related Agencies
1124 Longworth House Office Building
Washington, DC 20515

Dear Chairwoman Pingree and Ranking Member Joyce:

The AI/AN Health Partners is a coalition of health organizations dedicated to improving health care for American Indians and Alaska Natives (AI/ANs). AI/ANs face substantial health disparities, and higher mortality and morbidity rates than the general population. The Indian Health Service (IHS) is a critical aspect of how they access health care. However, the IHS must have sufficient resources to meet its mission to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. We urge you to fund the IHS at the highest amount possible as you work to finalize the fiscal year 2022 Interior Appropriations bill.

As health organizations that provide services for this vulnerable patient population, we thank you for the priority the Subcommittee has given the IHS in the Committee's fiscal year 2022 Interior Appropriations bill. We were pleased that the Committee provided \$92,843,000 for the Indian Health Professions, an increase of \$25,529,000 over current funding. We also appreciated the Committee's appropriation of \$116,640,000 for equipment which is \$87,553,000 above current funding. Together, these increases will help recruit and retain providers which is a top priority in Indian Country. Currently, there are almost 1,400 vacancies for health care providers in IHS, Tribal facilities, and Urban Indian Organizations.

The Administration requested \$284,500,000 for an electronic health record (EHR) system in its fiscal year 2022 budget. We are pleased to see that the Committee has fully funded the President's request. This will greatly aid health care providers to maintain a continuity of care for AI/AN patients.

The Senate Interior Appropriations Committee's fiscal year 2021 appropriations bill did not reach these levels and we strongly urge that, as you conference the bills, you maintain the House-passed funding levels for all of the above line items.

The Senate Interior fiscal year 2022 appropriations bill included \$7,679,279,000 for advanced appropriations for the Indian Health Service. Our coalition supports the provision which would provide the Service with two years of appropriations authority at a time rather than one. This would enable the IHS to augment the value of its funding through long term planning, improved budgeting, and better

contracting options. These improvements would benefit patients through better health service delivery and more cost-effective public health programming

The need for the advanced appropriation was addressed in a September 2018 GAO report, “INDIAN HEALTH SERVICE Considerations Related to Providing Advance Appropriation Authority.” IHS officials, tribal representatives, and other stakeholders told the GAO how budget uncertainty resulting from continuing resolutions and government shutdowns can have a variety of effects on the provision of HIS funded health care services for AI/ANs.

Regarding recruitment and retention of health care providers, GAO reported that IHS officials and tribal representatives said that funding uncertainties can exacerbate challenges to staffing health care facilities:

“...when recruiting health care providers, IHS officials said CRs and potential government shutdowns create doubt about the stability of employment at IHS amongst potential candidates, which may result in reduced numbers of candidates or withdrawals from candidates during the pre-employment process. IHS officials said that many providers in rural and remote locations are the sole source of income for their families, and the potential for delays in pay resulting from a government shutdown can serve as a disincentive for employees considering public service in critical shortage areas that do not offer adequate spousal employment opportunities. Tribal representatives said CRs create challenges for tribes in funding planned pay increases—such as cost-of-living adjustments— for health care staff at their facilities, and they may, as a result, defer increases.”

Thank you for considering our requests. We look forward to working with you to improve health care for American Indians and Alaska Natives.

Sincerely yours,

Academy of Nutrition and Dietetics
American Academy of Dermatology Association
American Academy of Pediatrics
American Association of Colleges of Nursing
American College of Obstetricians and Gynecologists
American Dental Association
American Physical Therapy Association
American Psychological Association
Commissioned Officers Association of the USPHS