



USET

SOVEREIGNTY PROTECTION FUND

Nashville TN Office
711 Stewarts Ferry Pike, Ste. 100
Nashville TN 37214
P: (615) 872-7900
F: (615) 872-7417

Washington DC Office
400 North Capitol St., Ste. 585
Washington DC 20001
P: (202) 624-3550
F: (202) 393-5218

Transmitted via consultation@ihs.gov

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Rear Admiral Michael Weahkee
Acting Director
Indian Health Service
5600 Fishers Lane, Mail Stop 08E86
Rockville, MD 20857

Dear Acting Director Weahkee,

On behalf of the United South and Eastern Tribes Sovereignty Protection Fund (USET SPF) we write to provide comment on the Draft Framework for the Indian Health Service's (IHS) Strategic Plan for Fiscal Years (FY) 2018-2022 in response to Tribal Consultation initiated by IHS on September 15, 2017. Below, we identify themes that must be included in the final Plan, if it is to be fully reflective of the federal trust obligation and responsibility to provide quality healthcare within Indian Country.

USET SPF is a non-profit, inter-tribal organization representing 27 federally recognized Tribal Nations from Texas across to Florida and up to Maine¹. Both individually, as well as collectively through USET SPF, our member Tribal Nations work to improve health care services for American Indians. Our member Tribal Nations operate in the Nashville Area of the Indian Health Service, which contains 36 IHS and Tribal health care facilities. Our citizens receive health care services both directly at IHS facilities, as well as in Tribally-operated facilities under contracts with IHS pursuant to the Indian Self-Determination and Education Assistance Act (ISDEAA), P.L. 93-638.

Fully Meeting Trust Obligations

As IHS seeks to achieve a plan that "promotes Tribal ownership and pride," USET SPF reminds the agency that any plan must acknowledge and reflect the commitment by the agency to uphold federal trust obligations to American Indians and Alaska Natives (AI/ANs). These obligations are the result of millions of acres of land and resources ceded to the U.S., and result in a legal and moral responsibility on behalf of the federal government to provide benefits and services in perpetuity to AI/ANs. It is imperative that the final Strategic Plan reflect the trust responsibility to deliver quality, culturally competent healthcare to AI/ANs. It is incumbent upon IHS to address failures to uphold treaty and trust obligations to Tribal Nations, and to outline this commitment in its Strategic Plan. This includes any preamble language, mission statement, appropriate goals, strategies, and measures associated with the execution of agency responsibilities. USET SPF expects that this will be the main focus of the final strategic plan.

¹ USET SPF member Tribal Nations include: Alabama-Coushatta Tribe of Texas (TX), Aroostook Band of Micmac Indians (ME), Catawba Indian Nation (SC), Cayuga Nation (NY), Chitimacha Tribe of Louisiana (LA), Coushatta Tribe of Louisiana (LA), Eastern Band of Cherokee Indians (NC), Houlton Band of Maliseet Indians (ME), Jena Band of Choctaw Indians (LA), Mashantucket Pequot Indian Tribe (CT), Mashpee Wampanoag Tribe (MA), Miccosukee Tribe of Indians of Florida (FL), Mississippi Band of Choctaw Indians (MS), Mohegan Tribe of Indians of Connecticut (CT), Narragansett Indian Tribe (RI), Oneida Indian Nation (NY), Pamunkey Indian Tribe (VA), Passamaquoddy Tribe at Indian Township (ME), Passamaquoddy Tribe at Pleasant Point (ME), Penobscot Indian Nation (ME), Poarch Band of Creek Indians (AL), Saint Regis Mohawk Tribe (NY), Seminole Tribe of Florida (FL), Seneca Nation of Indians (NY), Shinnecock Indian Nation (NY), Tunica-Biloxi Tribe of Louisiana (LA), and the Wampanoag Tribe of Gay Head (Aquinnah) (MA).

Addressing Chronic Underfunding

The goals within the Draft Framework do not acknowledge the vast and chronic funding deficits at IHS, particularly how they contribute to the agency's failures in providing quality healthcare to AI/ANs. The disparities and challenges that exist at IHS will not be addressed until agency is fully funded. USET SPF recommends including language outlining the unmet funding obligations within the agency, as well as a strategy to address these shortfalls. IHS must use every opportunity to advocate for increased funding within the Strategic Plan, emphasizing that meaningful progress on the challenges within the agency will not be made unless unmet funding obligations are addressed by Congress.

Commitment to Meaningful Tribal Consultation

The IHS Strategic Plan must also be reflective of IHS' commitment to robust and continued Tribal Consultation. This includes fully engaging with Tribal Leaders and Tribal Nations across the country on an ongoing basis. However, the Draft Framework does not currently include this commitment. Unique healthcare issues exist within each Tribal community, and the agency has an obligation to seek and implement the guidance of Tribal Nations across the country. Tribal consultation is essential to the sacred government to government relationship between Tribal Nations and the United States, and is critical to ensuring the federal government fulfills its trust responsibilities and obligations. Thus, USET SPF finds the absence of Tribal consultation language in the Framework troubling. IHS must ensure the final Strategic Plan reflects the responsibility to fully engage with Tribal Nations in a meaningful and consultative manner with a goal of reaching consent for federal actions.

Build, Strengthen, and Sustain Collaborative Relationships

USET SPF encourages IHS to strengthen language within the Strategic Plan that underscores its responsibility to coordinate with other federal agencies as it works to ensure the healthcare needs of Tribal Nations are met. The federal government, including all agencies therein, has a trust obligation and responsibility to Tribal Nations. These obligations are not limited to IHS and are carried out not just through funding, but through meaningful government-to-government consultation and coordination with Tribal Nations. By building, strengthening and coordinating efforts with other federal partners, IHS can uphold and advance this federal trust responsibility more completely.

For example, when working to address the devastating effects the opioid crisis has had within Indian Country, IHS must coordinate with other federal agencies to ensure a comprehensive response from Indian Country. This includes other operational divisions within the Department of Health and Human Services, such as the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Services Administration, as well as the Department of Justice and the Department of Interior. A coordinated effort among federal agencies will ensure the opioid epidemic is addressed in the most comprehensive manner possible, both in Indian Country and nationally.

Tribal Self-Determination & Self-Governance

As written, the Draft Framework appears to only focus on goals and measures associated with services directly provided by the IHS, and does not include any mention of Tribal self-determination or self-governance. The IHS Strategic Plan must be reflective of the important role that Tribal self-governance has within the Indian Health System, and ensure the agency is engaging in meaningful relationships with Tribal Nations who choose to operate their own programs. USET SPF urges the inclusion of language within the Strategic Plan that is reflective of IHS' commitment to uphold and promote the principles of Tribal self-governance. By engaging in Tribal self-governance, Tribal Nations and the federal government are able to

work together to promote the exercise of inherent Tribal sovereignty and self-determination to meet the unique needs and priorities of our communities. Like Tribal consultation, this is a critical function of the IHS.

Conclusion

USET SPF appreciates the opportunity to provide initial guidance and comments to IHS on the Draft Framework for its Strategic Plan for FY 2018-2022 and looks forward to providing additional recommendations as the IHS Strategic Planning Workgroup moves forward. The services delivered by and through the IHS are critical to the execution of the federal trust responsibility. With this in mind, we support changes and additions to the Plan that do more to undergird our sacred relationship and welcome additional opportunities, through consultation, to further refine its goals and objectives. Should you have any questions or require further information, please contact Ms. Liz Malerba, USET SPF Director of Policy and Legislative Affairs, at LMalerba@usetinc.org or 202-624-3550.

Sincerely,



Kirk Francis
President



Kitcki A. Carroll
Executive Director