



NATIONAL CONGRESS OF AMERICAN INDIANS

The National Congress of American Indians  
Resolution #REN-19-034

**TITLE: Calling on Congress to Enact Legislation Ensuring the Provision of Health Care to American Indian and Alaska Native Veterans Living in Urban Centers**

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**WHEREAS**, we, the members of the National Congress of American Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants the inherent sovereign rights of our Indian nations, rights secured under Indian treaties and agreements with the United States, and all other rights and benefits to which we are entitled under the laws and Constitution of the United States and the United Nations Declaration on the Rights of Indigenous Peoples, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise promote the health, safety and welfare of the Indian people, do hereby establish and submit the following resolution; and

**WHEREAS**, the National Congress of American Indians (NCAI) was established in 1944 and is the oldest and largest national organization of American Indian and Alaska Native (AI/AN) tribal governments; and

**WHEREAS**, tribal nations have a unique government-to-government relationship with the United States; and

**WHEREAS**, AI/ANs serve in the military at higher rates than any other population; and

**WHEREAS**, the majority of the AI/AN population resides in urban areas today; and

**WHEREAS**, the term "Urban Indian" refers to an AI/AN person who is not living on a reservation, either permanently or temporarily – often historically because of the federal government's forced relocation policy or economic or educational opportunities; and

**WHEREAS**, Congress has long recognized that the federal government's obligation to provide health care for AI/AN people follows them off reservation; and

**WHEREAS**, in 1955, Congress created the Indian Health Service (IHS) in order to fulfill its trust responsibility to protect the interests of tribal nations through the provision of health care to AI/AN people; and

**WHEREAS**, the federal trust responsibility to provide health care to AI/ANs does not apply solely to the IHS because the obligation extends to all government agencies, including the VA; and

**WHEREAS**, in 1975, Congress enacted the Indian Self-Determination and Education Assistance Act to enable tribal nations and organizations to directly operate health programs to provide services to AI/ANs that would otherwise be operated by IHS; and

**WHEREAS**, in 1976, Congress passed the Indian Health Care Improvement Act (IHCIA), in which Title V authorized federal funding for urban Indian organizations to provide health services to AI/ANs located in urban centers; and

**WHEREAS**, in IHCIA, Congress declared that “it is the policy of this Nation, in fulfillment of its special trust responsibilities and legal obligations to Indians...to ensure the highest possible health status for Indians *and urban Indians* and to provide all resources necessary to effect that policy;” and

**WHEREAS**, the unmet health needs of AI/ANs are severe and the health status of AI/ANs is far below that of the general population of the United States; and

**WHEREAS**, IHS continues to be funded by Congress at less than half of the expected need, leading to rationed care and worse health outcomes for AI/ANs; and

**WHEREAS**, IHS spends less than one percent of its current budget on the provision of health care to urban Indians, with only one budget line item that addresses urban Indian healthcare; and

**WHEREAS**, Section 405(c) of the IHCIA, as amended and permanently enacted by the Patient Protection and Affordable Care Act (ACA), requires the U.S. Department of Veterans Affairs (VA) to reimburse IHS, tribal nations, and tribal organizations for services provided to beneficiaries eligible for services from either agency; and

**WHEREAS**, Urban Indian Organizations (UIOs) are integral to the federal government’s fulfillment of its trust responsibility to provide health care to AI/AN people and therefore are not severable from the greater IHS system; and

**WHEREAS**, pursuant to IHCIA, IHS and VA entered into a Memorandum of Understanding (MOU) to promote better health care for AI/AN veterans; and

**WHEREAS**, the stated purpose of the MOU recognizes the importance of a coordinated and cohesive effort with a national scope, while also acknowledging that the implementation of such efforts requires local adaptation to meet the needs of individual tribal nations, villages, islands, and communities, as well as local VA, IHS, tribal, and UIO health programs; and

**WHEREAS**, although VA and IHS have implemented their MOU for IHS and tribal providers, VA has made a discretionary decision to refuse to enter into agreements with UIOs that have Title V contracts with IHS; and

**WHEREAS**, agreements with UIOs that provide care to AI/AN veterans would not only alleviate wait times at VA facilities, but would also provide culturally competent care to the AI/ANs being served; and

**WHEREAS**, addressing this gap in the IHS-VA MOU implementation will foster consistency, improve transparency, and provide support and services to eligible AI/AN veterans and their caregivers, as intended; and

**WHEREAS**, cultural competency is crucial to reducing AI/AN health disparities and improving access to health care, and AI/AN veterans often prefer to use Indian health care providers for reasons related to cultural competency, familial relations, wait times, or availability of Native-specific cultural and social services; and

**WHEREAS**, veterans are more likely to receive the care they have earned if they can choose where, how, and from whom they receive care.

**NOW THEREFORE BE IT RESOLVED**, that the National Congress of American Indians (NCAI) urges Congress to pass legislation that amends the Indian Health Care Improvement Act at 25 U.S.C. §1645(c) to insert UIOs after IHS and Tribal Organizations and require VA to reimburse for services provided to AI/AN veterans at all of the IHS, Tribal, and urban (I/T/U) system, in order to protect the health and welfare of AI/AN veterans living in urban centers, thereby honoring their sacrifices; and

**BE IT FURTHER RESOLVED**, that this resolution shall be the policy of NCAI until it is withdrawn or modified by subsequent resolution.

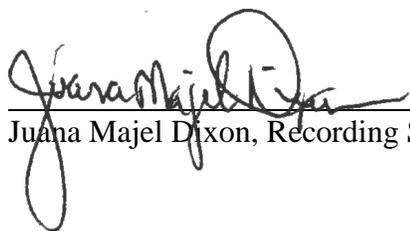
#### CERTIFICATION

The foregoing resolution was adopted by the General Assembly at the 2019 Mid-Year Session of the National Congress of American Indians, held at the Nugget Casino Resort, June 24-27, 2019, with a quorum present.



Jefferson Keel, President

**ATTEST:**



Juana Majel Dixon, Recording Secretary