

AI/AN Health Partners

October 19, 2022

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 critical to 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.

A long-standing priority for our organizations has been to increase the professional workforces in facilities run by the IHS and tribal organizations. The House Interior fiscal year 2023 appropriations bill, as approved by the House of Representatives on July 20, 2022, includes several significant budget increases that we believe will dramatically improve the delivery of health care to AI/ANs.

The Health Professions account provides loan repayment, the Service's best recruitment tool, for providers who work in Indian Country. It also funds scholarships for Native American health care students. Currently, the IHS lacks sufficient funding to meet its needs. The Service has over 1,398 vacancies for health care professionals. In fiscal year 2021, a total of 1,658 health care professionals received loan repayment. However, the IHS had 341 requests for loan repayment that could not be fulfilled. At the same time, the Service had over 500 new scholarship applicants but was only able to fund 255 new awards. **For fiscal year 2023, we urge you to support the House Interior Appropriations bill amount of \$93,568,000 for the Indian Health Professions account to help the IHS to close its vacancy gap.**

Medical and diagnostic equipment

Health care professionals need modern equipment to make accurate clinical diagnoses and prescribe effective medical treatments. The IHS and tribal health programs manage approximately 90,000 devices consisting of laboratory, medical imaging, patient monitoring, pharmacy, and other biomedical, diagnostic, and patient equipment. However, many of these facilities are using outdated equipment like analog mammography machines. In some cases, they are using equipment that is no longer manufactured. Today's medical devices/systems have an average life expectancy of approximately six to eight years. The IHS calculates that to replace the equipment at the end of its six to eight-year life

would require approximately \$100 million per year. **We urge you to support the fiscal year 2023 House approved amount of \$118,511,000 for health care facilities equipment.**

Staff quarters

Decent staff housing is essential for the IHS and tribes to be able to recruit health care personnel. Many of the 2,700 staff quarters across the IHS health delivery system are more than 40 years old and in need of major renovation or total replacement. Additionally, in a number of locations the amount of housing units is insufficient. Decent staff quarters, especially in remote areas, is essential for attracting and keeping health care providers in Indian Country.

In a March 23, 2021, hearing before the House Natural Resources Subcommittee for Indigenous Peoples of the United States, the Honorable Rodney Cawston, Chairman, Colville Business Council Confederated Tribes of the Colville Reservation Nespelem, WA spoke about how the lack of housing affected tribes' ability to attract health care workers. "Included in the housing needs on a reservation to recruit working professionals, especially medical professionals to rural communities like Washington state it's always difficult because we don't always have the available housing for working professionals."

For fiscal year 2023, the House Appropriations Committee set aside \$40,000,000 in the Health Care Facilities line item specifically for staff quarters at existing facilities. We strongly urge you to maintain this directive. The Senate Committee included report language seeking a report on the situation, but that will only delay needed funding.

Electronic Health Record

Being able to have a modern electronic health record (EHR) system, is essential to enable the IHS and tribal health professionals to provide accurate and vital health care for patients. The IHS uses its EHR for all aspects of patient care, including maintaining patient records, prescriptions, care referrals, and billing insurance providers that reimburse the Service for over \$1 billion annually. A new EHR system will allow the IHS and tribes to communicate with other entities that AI/AN patients seek care from like the Veterans Affairs, Department of Defense, and tribal and urban Indian health programs. **We urge you to support a fiscal year 2023 appropriation of \$284,500,000 for an electronic health record system.** This is the same amount that the House approved, and the Administration requested.

Advanced appropriations

Our organizations were pleased that for fiscal year 2023, the Senate Interior Subcommittee provided \$5,577,077,000 for advanced appropriations for the Indian Health Service. The need for the advanced appropriations 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 (CRs) and government shutdowns can have a variety of effects on the provision of IHS 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.”

The House Appropriations Committee did not include funding for advanced appropriations in its fiscal year 2023 bill for the Indian Health Service. **We urge you to recede to the Senate and include advanced appropriations in the final Fiscal year 2023 IHS appropriation.**

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 Association of Colleges of Osteopathic Medicine
American College of Obstetricians and Gynecologists
American Dental Association
American Dental Education Association
American Psychological Association
Association of American Medical Colleges
Commissioned Officers Association of the USPHS
National Kidney Foundation