

### 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 Kalispell Tribe Klamath Tribe Kootenai Tribe Lower Elwha Tribe Lummi Tribe Makah Tribe Muckleshoot Tribe Nez Perce Tribe Nisqually Tribe Nooksack Tribe NW Band of Shoshoni Tribe Port Gamble S'Klallam Tribe Puyallup Tribe Ouileute Tribe Quinault 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

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Yakama Nation

#### **RESOLUTION # 21-01-05**

# COVID-19 FUNDING TO TRIBES AND IHS/TRIBAL HEALTH CLINICS

WHEREAS, the Northwest Portland Area Indian Health Board (NPAIHB) is a tribal organization under P.L. 93-638 that represents forty-three Federally-recognized Indian tribes in Idaho, Oregon, and Washington on health-related issues; and

**WHEREAS**, the NPAIHB is dedicated to assisting and promoting the health needs and concerns of Indian people; and

**WHEREAS,** on March 11, 2020, the Novel Coronavirus ("COVID-19") was declared a pandemic by the World Health Organization and on March 13, 2020 was declared a national emergency by the President; and

**WHEREAS**, in March and April, four legislative packages were signed into law by the President (H.R. 6074, H.R. 6201, H.R. 748, H.R. 266) that provided COVID-19 funding to tribes for economic relief and to the Indian health system for health care/public health; and

**WHEREAS**, while tribes are grateful for the COVID-19 funding, dissemination of the funding through the U.S. Treasury and Department of Health and Human Services was delayed and/or has been burdensome for tribes and IHS/Tribal health care programs to access; and

WHEREAS, closures of tribal enterprises caused drastic reductions in revenue that supports health and human services, and reduction of IHS/Tribal health care program hours during the pandemic caused significant losses of revenue and third-party collections, which fund critical services for American Indians and Alaska Natives; and

**WHEREAS**, our tribal governments and tribal health administrators are focused on providing essential care to our people during this global pandemic; and

**WHEREAS**, the administrative complexity of tracking multiple funding streams from multiple federal agencies adds an undue burden to an already strained health delivery system; and

**WHEREAS**, federal agencies that released COVID-19 funding through grants made the application and reporting process burdensome for tribes and IHS/Tribal health care facilities, and there is concern about the complexity of multiple and overlapping funding sources; and

**WHEREAS**, future funding for tribes and IHS/tribal health care programs for COVID-19 must allow flexibility to meet the specific needs in tribal communities and

clinics, including trailer purchases, modification of buildings or other small construction project needs in this pandemic.

**NOW THEREFORE BE IT RESOLVED,** that the Northwest Portland Area Indian Health Board (NPAIHB) calls on Congress to make legislative changes that would allow for the Department of the Treasury and the Department of Health and Human Services (HHS), and its agencies, to:

- Extend any funding deadlines that end in December 2020 to December 31, 2021;
- Provide flexibility in use of COVID-19 funding to ensure that tribes are able to use the funds most beneficial for tribes or IHS/Tribal health facilities, including small construction projects and losses of third party collections; and

**BE IT FURTHER RESOLVED** that NPAIHB calls on Congress to ensure that any future appropriations for COVID-19 have a three-year time frame to expend funds; and

**BE IT FURTHER RESOLVED** that NPAIHB requests that the HHS, and its agencies:

- Streamline and simplify any application and reporting requirements for COVID-19 funding distributions from March 2020 forward that were set up as grants;
- Provide flexibility in use of COVID-19 funding to ensure that tribes are able to use the funds beyond any deadlines and for the purpose most beneficial for tribes or IHS/Tribal health facilities, including small construction projects and third party reimbursement losses;
- o Allow for attestation as to use of funds rather than a complex auditing process; and
- Ensure prompt and meaningful tribal consultations as to COVID-19 funding distributions related to all HHS agencies, but in particular related to Medicaid and Medicare funding; and
- o Ensure Indian Health Care Providers have access to both Medicaid and Medicare relief funding.

## **CERTIFICATION**

### NO. 21-01-05

The foregoing resolution was duly adopted at the Virtual October 20-21, 2020	
Quarterly Board Meeting of the Northwest Portland Area Indian Health Board.	. A
quorum being established; <u>26</u> for, <u>0</u> against, <u>0</u> abstain of	on
October 21, 2020.	

Chairman

Secretary

October 21, 2020 Date