## AI/AN Health Partners

June 9, 2020

The Honorable Mitch McConnell Majority Leader U.S. Senate S-230 U.S. Capitol Building Washington, DC 20510

The Honorable Charles F. Schumer Minority Leader U.S. Senate S-221 U.S. Capitol Building Washington, DC 20510

Dear Majority Leader McConnell and Minority Leader Schumer:

The AI/AN Health Partners is a coalition of health organizations dedicated to improving health care for American Indians and Alaska Natives (AI/ANs). Our organizations are writing to urge you to provide necessary funding for tribes and the Indian Health Service (IHS) in the Senate's next coronavirus legislation package to address the COVID-19 pandemic.

COVID-19 has exacerbated the already existing health disparities, and high mortality and morbidity rates that AI/ANs face every day. On June 3rd, the IHS reported that over 12,000 Native Americans tested positive for COVID-19. However, the total number of COVID-19 cases could be much higher because reporting by tribal and urban Indian health programs is voluntary. The Navajo Nation has been hit particularly hard by the virus, reporting over 6,400 infected and more than 250 deaths.

As you write the next coronavirus legislation, we urge you to <u>at least</u> match the funding provisions to address the needs of AI/AN Americans included in H.R. 6800, the House-passed HEROES Act, which are:

**Bureau of Indian Affairs** – \$900 million to meet Tribal government needs necessary to prevent, prepare for, and respond to coronavirus, including:

- \$780 million to continue Tribal government operations and programs and to clean Tribal facilities.
- \$100 million to address overcrowded housing which is prohibiting social isolation.
- \$20 million for sanitation needs to provide for water hydration and hygiene issues to mitigate and respond to the coronavirus.

**Indian Health Service** – \$2.1 billion to address health care needs related to coronavirus for Native Americans, including:

- \$1 billion to account for lost third party revenues as a result of reduced medical care.
- \$64 million to assist Urban Indian Organizations.
- \$10 million to assist with sanitation, hydration and hygiene needs in Indian Country necessary to prevent, prepare for, and respond to the coronavirus.

- \$500 million to provide health care, including telehealth services to Native Americans, and to purchase medical supplies and personal protective equipment.
- \$140 million to expand broadband infrastructure and information technology for telehealth and electronic health records system purposes.
- \$20 million to provide health care, housing and isolation units for domestic violence victims and homeless Native Americans.
- No less than \$366 million to provide isolation or quarantine space.

We also urge you to include S. 2871, the Indian Health Service Health Professions Tax Fairness Act, in the next coronavirus response bill. The legislation seeks to amend the tax code to provide health care professionals who receive student loan repayments and scholarships from the IHS the same tax-free status enjoyed by those who receive National Health Service Corps (NHSC) loan repayments. The IHS uses a large portion of its resources to pay the taxes that are assessed on its loan recipients, which undermines provider recruitment and retention. Currently, the Service is spending 25 percent of its Health Professions' account for taxes. Making the IHS loan repayments and scholarships tax-free would save the agency over \$9.1 million and would support an additional 190 health care providers without increasing the Service's annual appropriation.

The funding requests itemized above are the <u>minimum</u> that AI/ANs need to address COVID-19. Before the COVID-19 emergency began, the Indian Health system suffered from pervasive health care provider shortages, antiquated health care infrastructure, a lack of up-to-date medical equipment and decent housing for health care staff and AI/ANS.

We are aware that national and regional AI/AN tribal organizations have written to Congress identifying \$8.25 billion in critical funding to allow tribes and Indian health programs to fully address the pandemic in Indian country. Their requests, outlined in an April 8<sup>th</sup> Senate letter, (<a href="https://www.nihb.org/covid-19/wp-content/uploads/2020/04/FINAL\_SENATE\_ATTACHMENT-1\_NIHB\_\_-Phase-4-Tribal-Healthcare\_Public-Health-Priorities.pdf">https://www.nihb.org/covid-19/wp-content/uploads/2020/04/FINAL\_SENATE\_ATTACHMENT-1\_NIHB\_\_-Phase-4-Tribal-Healthcare\_Public-Health-Priorities.pdf</a>) encompass additional funding for their health systems, infrastructure including roads and health care facilities, housing, education, water and sewer systems, telecommunications, and broadband needs. We strongly urge you to fully meet their requests.

Thank you for considering our requests.

We look forward to working with you,

American Academy of Dermatology Association American Academy of Pediatrics American Association of Colleges of Nursing American Association of Colleges of Pharmacy

American Dental Association

American Dental Education Association

American Optometric Association

American Physical Therapy Association

American Psychological Association

Association of American Indian Physicians

Commissioned Officers Association of the U.S. Public Health Service, Inc. (COA)

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