August 10, 2018

RADM Michael D. Weahkee, Acting Director
Indian Health Service
Mail Stop: 08E37A
5600 Fishers Lane
Rockville, MD 20857

RE: Updates to Indian Health Service (IHS) Tribal Consultation Policy

Dear RADM Weahkee:

On behalf of the IHS Tribal Self-Governance Advisory Committee (TSGAC), I am writing to follow up with you regarding the process to update the IHS Tribal Consultation Policy. As you are well aware, the agency has initiated numerous consultations with Tribal governments over the past year involving development and/or updates to program policies and process, funding mechanisms and strategic planning. Further, the TSGAC Tribal leadership and technical representatives have been active members in the many joint IHS/Tribal Workgroups that have been established by the agency to address these issues; and by which form the basis for recommendations that are broadly distributed by the agency for further Tribal input and comment under the IHS Tribal Consultation policy.

The IHS Tribal Consultation Policy was last updated in January 2006. As stated in the current policy, “Tribal Governments and the Indian Health Service (IHS) share the goal of eliminating the health disparities of American Indians and Alaska Natives (AI/AN) and ensuring their access to critical health services is maximized. To achieve this goal, it is essential that Tribal Governments and the IHS engage in open, continuous, and meaningful consultation. True consultation leads to information exchange, mutual understanding, and informed decision-making. The importance of consultation with Tribal Governments was affirmed through 1994 and 2004 Presidential Memoranda and Executive Orders issued in 1998 and 2000.”

Given the importance of the IHS Tribal Consultation policy and its resulting impact on the operation of key IHS programs, funding distributions and policies, the TSGAC is appreciative of the IHS’s partnership in ensuring that Tribal governments have a voice and seat at the table during these critical discussions. However, we believe that it would be beneficial for the IHS and Tribes to review the current policy and have an opportunity to develop further recommendations and improvements. For example, an essential part of the consultation process should involve a provision and/or protocol on how feedback from Tribes is incorporated into the final product approved by the agency.

Therefore, we would like to recommend the formation of a joint Federal/Tribal Workgroup consisting of representatives from all IHS Areas, including representation of Self-Governance, Title I and Direct Service Tribes to review and develop recommendations to update the IHS Tribal Consultation Policy.
The establishment of this Workgroup would be a positive step and provide a great opportunity to take a fresh look at the policy and develop any needed updates to improve this important government-to-government process. We appreciate your continued commitment and partnership to advance these issues and hope that you will seriously consider these recommendations. Thank you.

Sincerely,

Chief Lynn Malerba, Mohegan Tribe of Connecticut
Chairwoman, IHS TSGAC

Nicolas Barton, Executive Director
Cheyenne & Arapaho Tribes
Chairman, IHS DSTAC

cc: Jennifer Cooper, Acting Director, Office of Tribal Self-Governance, IHS
Roselyn Tso, Acting Director, Office of Direct Service and Contracting Tribes, IHS