Navajo Leaders Attend 13th Annual HHS Tribal Budget and Policy Consultation Meeting

Washington, DC — In early March, Navajo Nation Council Delegate Jonathan Hale (Oaksprings, St. Michaels) and Navajo Nation Vice-President Rex Lee Jim attended the 13th Annual Health and Human Services (HHS) Tribal Consultation Budget Meeting hosted by HHS Secretary Kathleen Sebelis at the Hubert H. Humphrey Building in Washington DC.

“I’m glad to be part of the Navajo delegation and being able to meet other native health advocates and leaders from across the country,” said Delegate Hale. “Navajo needs to stay involved and informed and stand in unison with our fellow tribes to ensure the people get the health care they need.”

Among those in attendance included Navajo Nation Vice President Rex Lee Jim, Chairmen Gary Hayes (Ute Mountain Ute), and Ned Norris Jr. (Tohono O’odham). The three leaders presented to HHS Officials the national budget priorities for native nations. With the assistance of the National Indian Health Board (NIHB), they advocated for a 10-year plan to fully fund the Indian Health Service (IHS) and a $1.431 billion increase in “must-have” spending for FY 2013. They also provided 10 leading health priorities as ranked by Tribal leaders nationally with behavioral health leading the list. In addition to these requests, the group also presented Secretary a letter signed by numerous Tribal leaders opposing the proposed eliminations within the FY 2012 IHS budget. Among the grants in jeopardy included; Health Promotion/Disease Prevention (HPDP) Grants, Elder Health Long Term Care Grants, Children and Youth Grants, Women’s Health Grants and the National Indian Health Board Cooperative Agreement.

The letter states, “As tribal leaders, we were surprised that the FY 2012 Congressional Justification (CJ) proposed these cuts, especially considering that we had just met and developed our FY 2013 budget recommendations with the agency and these proposed eliminations were not discussed.”

Various officials from several HHS operating divisions, including Centers for Medicare and Medicaid Services (MMS), Centers for Disease Control and Prevention (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA), and the Health Resources and Services Administration also provided comments and received recommendations from Tribal representatives on issues pertaining to Indian health.

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