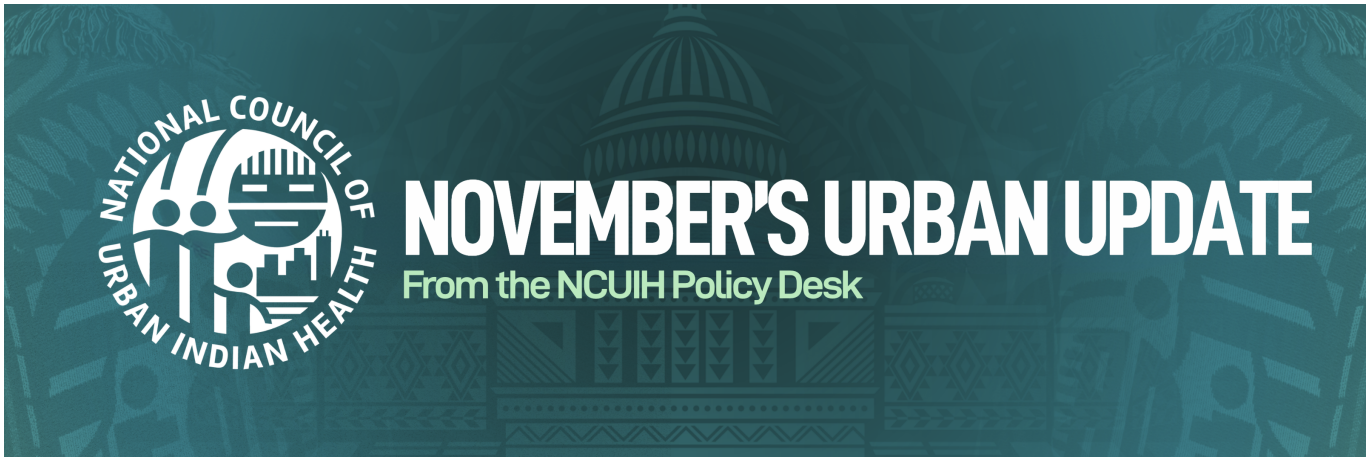
NCUIH November Policy Update: Shut Down Ends, Federal Funding Developments, Advocacy Priorities, and New Resources for UIOs

Category: Policy Blog
written by NCUIH | November 24, 2025



In this Edition:

- □ Senate Hearing on Shutdown Impacts in Native Communities
- □ Federal Funding Continued Through a New Continuing Resolution
- □ Congressional Briefing on Preventing Substance Use Disorder and Overdose
- □ New Resources: AARP Family Caregiving Guide and Overview of the One Big Beautiful Bill Act (OBBBA)
- □ Updates on Affordable Care Act Premium Tax Credits for American Indian and Alaska Native People
- □ Indian Health Service Fiscal Year 2028 Budget Formulation and Updated Information
- □ Tribal Government-to-Government Roundtable on Strengthening Tribal Sovereignty
- □ Staffing Updates at the Department of Health and Human Services and the Indian Health Service
- □ Office of Management and Budget Deregulatory Memo and New Supplemental Nutrition Assistance Program Provisions
- □ Health Resources and Services Administration Updates on the 340B Rebate Pilot and the Ryan White Program
- □ Data Standards Committee Updates on Medicaid Enrollment, Health Information Technology Modernization, and NCUIH's New Substance Use Disorder Fact Sheet

Appropriations and Shutdown Updates

Senate Committee on Indian Affairs Oversight Hearing

On October 29, 2025 the Senate Committee on Indian Affairs (SCIA) held an Oversight hearing addressed shutdown impacts on Native communities.

Vice Chairman Senator Schatz stated:

- “Native programs are not Diversity, Equity, and Inclusion spending or charity—they are the law.”
- “Attempting to cancel funds for Native programs, RIFing more that 42,000 federal employees, and eliminating tribal consultation policies – that’s not the Unites States government meeting its trust and legal obligations.”

Continuing Resolution / Federal Funding

On November 12, 2025, Congress reached an agreement on a Continuing Resolution (CR) to maintain FY 2025 funding through January 30, 2026.

- Prevents further shutdown disruptions that heavily impact Indian Country and Urban Indian Organizations.

The CR included language that reversed the RIF actions taken since October 1, as well as protections against future RIFs for the duration of the CR.

The CR also extended several key policy riders important to Indian country through January 30, 2026:

- Funding for the Special Diabetes Program for Indians (SDPI) at $159 million annualized.
- Extension of the Medicare telehealth flexibilities, which allows IHS, Tribal, and Urban Indian programs to resume billing Medicare for tele-visits.
- Extension of Community Health Center and National Health Service Corps funding.

Legislative Updates

Federal Medical Assistance Percentage (FMAP) Update

Bipartisan Urban Indian Health Parity Act (H.R. 4722): Ongoing advocacy for extending the Federal Medical Assistance Percentage increase for Urban Indian Organizations.

- Reintroduced by Reps. Ruiz (CA-25) and Bacon (NE-02)
- NCUIH is working to secure republican co-sponsors.
- Request for Urban Indian Organizations: Email Republican offices to sign on to the House bill.

Special Diabetes Program for Indians (SDPI)

Legislation supporting funding and reauthorization of SDPI has been introduced in the House and the Senate.

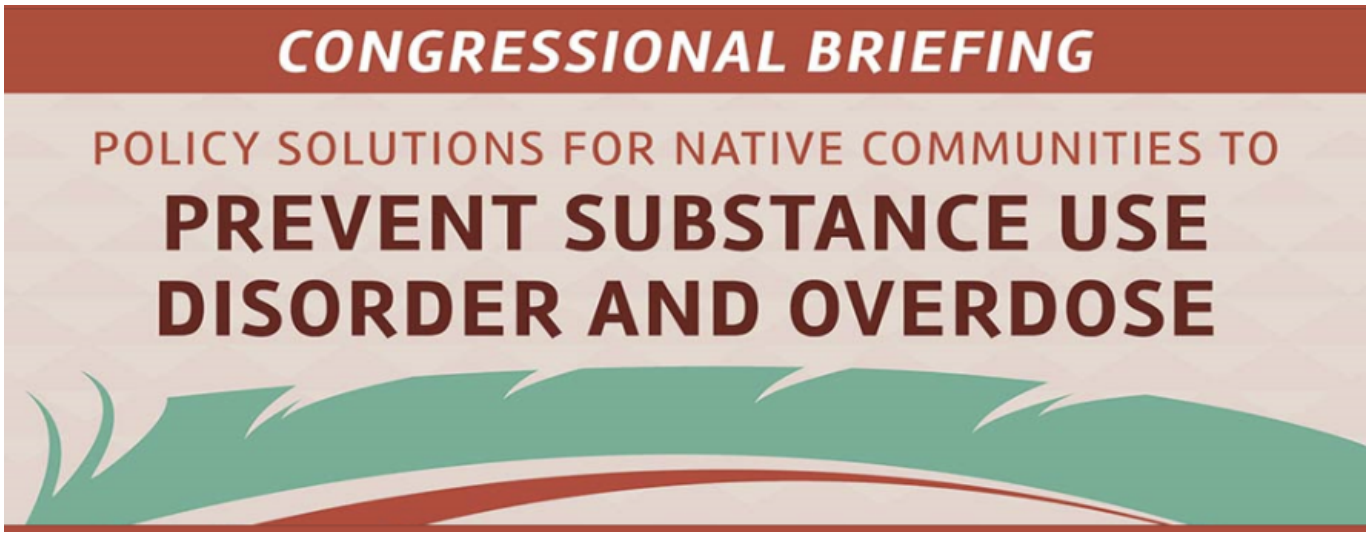
H.R.5488 – Bipartisan Special Diabetes Program for Indians Reauthorization Act of 2025

- $160 million for FY 2026-2030

S.2211 – Bipartisan Special Diabetes Program Reauthorization Act of 2025

- $160 million for FY 2026-2027

NCUIH Hosted Congressional Briefing



NCUIH hosted a congressional briefing on policy solutions to prevent Substance Use Disorder (SUD) and overdose in Native communities.

- Kerry Hawk-Lessard of Native American LifeLines presented on local initiatives and community-based efforts.

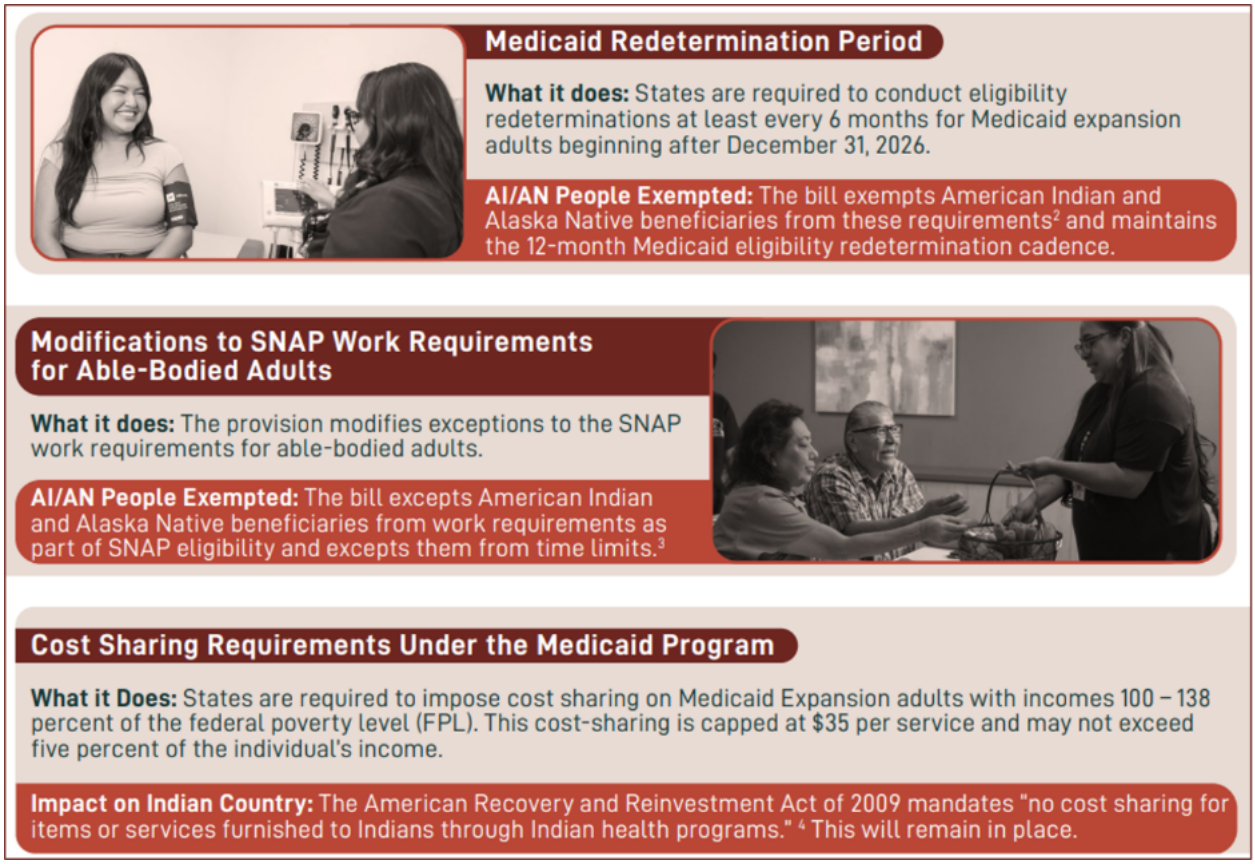
- NCUIH called on Congress to fund behavioral health programs that serve Native communities, especially in urban areas.

Highlights emphasized:

- The urgent need for culturally grounded prevention and treatment.
- The role of Urban Indian Organizations (UIOs) as essential access points.

New Resources Highlight

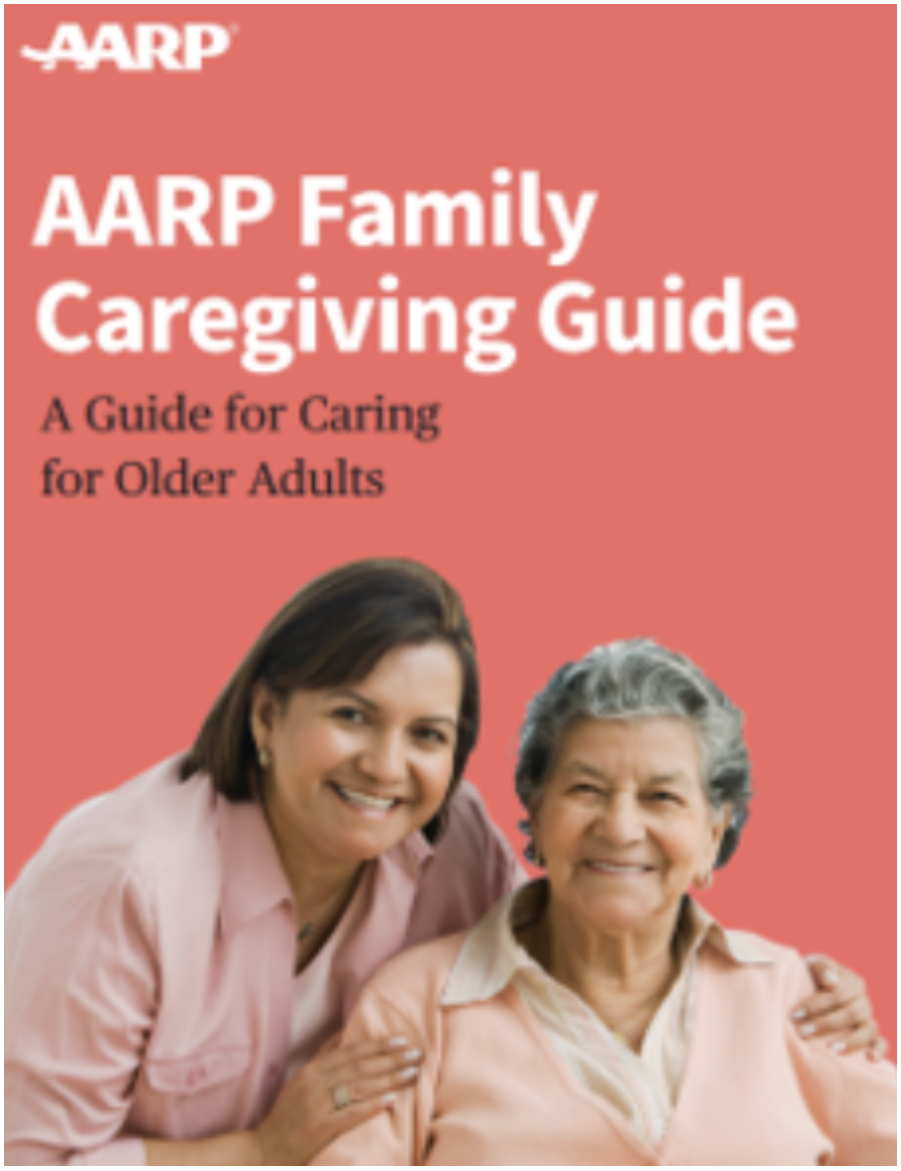
Overview of the One Big Beautiful Bill Act (OBBBA)



NCUIH has developed a one pager on key provisions and exemptions impacting American Indian and Alaska Native people in the OBBBA.

- This resource is available on the NCUIH Policy Resource Center webpage.

AARP Family Caregiving Guide



- The AARP Family Caregiving Guides support people navigating all stages of caregiving.

The guides include resources to:

- Find help assessing needs.
- Start important conversations.
- Evaluate your loved one’s needs.
- Develop or update a caregiving plan.
- Coordinate help while maintaining caretaker well-being.
- Manage grief and plan for life after caregiving.

Access here: https://www.aarp.org/caregiving/prepare-to-care-planning-guide/

Substance Use Disorder Fact Sheet

NCUIH Policy and Data Teams developed a new two-page fact sheet addressing:

- Disparities in overdose deaths among American Indian and Alaska Native people.
- The essential role of Urban Indian Organizations.
- Policy recommendations and needed federal actions.
- Fact sheet available for download on the NCUIH website.

NCUIH Advocacy for Premium Tax Credits

The letter highlights new analysis illustrating the impact on American Indian and Alaska Native families if enhanced premium tax credits expire. The Urban Institute estimates show:

- A significant portion of American Indian and Alaska Native people (318,000) rely on Marketplace plans with premium tax credits.
- Without enhanced tax credits, many (126,000) would lose coverage—representing an estimated 40 percent reduction for American Indian and Alaska Native enrollees.

NCUIH continues advocating for restored and enhanced Affordable Care Act premium tax credits for American Indian and Alaska Native families.

Indian Health Service Fiscal Year 2028 Budget Formulation

Indian Health Service has begun Fiscal Year 2028 budget formulation consultations.

Urban Indian Organization participation remains important for:

- Identifying priority service needs.
- Ensuring representation in federal budget recommendations.

NCUIH Technical Assistance:

- NCUIH held a prep session for UIOs on October 15.
- NCUIH sent out slide templates and talking points to UIOs by Area.
- If your UIO would like to schedule a one-on-one session with NCUIH to prepare for your respective Area budget consultation, please don’t hesitate to reach out to policy@ncuih.org.

Upcoming scheduled consultations:

- Phoenix: December 2-3, 9am-5pm AZ time (Hybrid)
- Alaska: December 9-11
- California: December 10
- Great Plains: December 10, 9am-3pm CST (virtual)

Updated Information Overall Funding Target

- The total funding amount to meet for fiscal year 2028 is $29.8 billion.
- This recommendation is $43.2 billion less than the previous year's recommendation.
- Due to the drastic decrease in recommended funding, the total recommendation for the Urban Health line item will likely be considerably less than previous years.
- NCUIH sent out updated resources with updated numbers.

Tribal Government-to-Government Roundtable Series

Third convening focused on preserving, protecting, and strengthening Tribal sovereignty.

NCUIH connected with:

- Rep. Begich (R-AK), Vice Chair of the Native American Caucus
- HHS Secretary Robert Kennedy Jr.
- HHS Senior Advisor Mark Cruz
- HHS Senior Advisor for Medicaid, Charles Chapman
- White House Office of Intergovernmental Affairs
- Tribal leaders

Federal Staffing Updates: IHS Announces New Chief of Staff

Indian Health Service

The Indian Health Service announced a new Chief of Staff, Clayton Fulton (Citizen of the Cherokee Nation)

- Responsible for overseeing the coordination of key agency activities and supporting the Office of the Director in a broad range of duties related to the development and implementation of IHS initiatives and priorities.
- NCUIH met with Clayton on Nov. 4 to discuss urban Indian health priorities.

NCUIH Leadership Meeting with Mark Cruz

- The NCUIH Board met with Senior Advisor to the HHS Secretary, Mark Cruz, on October 21 to discuss federal priorities.

Reduction in Force (RIFs)

- IHS was not included in RIFs; HHS also extended that to tribal programs in other operating divisions.
- There is ongoing litigation regarding the RIFs.

HHS Grants

- Cruz warned that funding may be cut across HHS authorizing divisions.
- Please let NCUIH know if you have any issues with your grant funding.

HHS Key Staffing Updates

- IHS Director still has not been appointed. Acting Director Smith can serve until mid-November.
- Dr. Kim Hartwood started at IHS as Chief of Strategic Initiatives.
- The Senior Advisor who worked with Secretary Kennedy on SAMHSA matters, Chris Jones, resigned last Friday. Mark Cruz has been asked to caretake SAMHSA.
- Administration for Children and Families has a new Assistant Secretary – Alex Adams. Has experience working with Idaho Tribes.

Regulatory Updates: Office of Management and Budget and U.S. Department of Agriculture

Office of Management and Budget Deregulatory Memo

The memo is on streamlining the administration's deregulatory efforts.

- Lays out guidance to agencies on how it should conduct Tribal consultation during a deregulation review process.
- Discussed that most deregulatory efforts should not trigger Tribal consultation, and that if there is a need for Tribal consultation, that general notice and comment period for stakeholders is considered sufficient consultation.
- Issues guidance on how political appointees can repeal regulations without a formal notice or comment period if the official deems the regulation unlawful.

U.S. Department of Agriculture Memo: Supplemental Nutrition Assistance Program (SNAP) Provisions in OBBBA

OBBBA modifies exemptions to the Able-Bodied Adults Without Dependents (ABAWD) time limit rule of receiving SNAP for only 3 months in a 3-year period if they do not meet certain work requirements by:

- Expanding the age range to 18-64 (previously 18-54)
- Limits the exception for a parent with responsibility for a dependent child to children under 14 years of age (previously 18 years of age)
- Eliminating certain exemptions (homeless individuals, veterans, and foster youth).

New Exceptions for AI/AN people are not subject to the time limit:

- "An Indian" as defined in paragraph (13) of section 4 of the IHCIA;

- “An Urban Indian” as defined in paragraph (28) of Section 4 of the IHCIA; and
- “A California Indian” as described in section 809(a) of the IHCIA.

Health Resources and Services Administration (HRSA) Updates

340B Rebate Pilot Program

Background:

- Under the Program, covered entities continue to make purchases through their 340B wholesaler account and request rebates on specific drugs dispensed to 340B eligible patients after the purchase is made.
- All covered outpatient drugs, without a rebate model approved by HRSA, are subject to upfront discounted 340B prices.
- The Office of Pharmacy Affairs (OPA) has approved eight manufacturers’ plans for participation in the 340B Rebate Model Pilot Program for the January 1, 2026, start date.
- **Ryan White HIV/AIDS Program**

Background:

- HRSA is proposing to implement a funding methodology that calculates Ryan White HIV/AIDS Program (RWHAP) Part A and B formula awards based on living HIV and AIDS case data. This methodology would use the most recent address, rather than residence at diagnosis.
- The methodology for determining RWHAP Part A and B eligibility would remain unchanged.

Data Standards Committee Updates

Centers for Medicare & Medicaid Services Tribal Technical Advisory Group (TTAG) Data Subcommittee

Updates from July and August meetings:

- National Indian Health Board presentation on Indian Health Service registrants enrolled in Medicaid from 2019–2023.
- Some states with Medicaid expansion saw significant increases in enrollment.
- In 2023, approximately 57.1 percent of Indian Health Service registrants were enrolled in Medicaid.
- Wide variation in accuracy between Indian Health Service registrant data and the American Community Survey population across states.

No September or October updates due to the government shutdown.

Upcoming Tribal Consultations and Events

Consultation/Confer Dates:

- Urban Confer (virtual only): Thursday, January 8, 2026, 1:00 – 4:00 PM ET
- NCUIH will be holding a virtual prep session on January 7, 2025, at 1pm ET

Tribal Consultations (in person only):

- Monday, December 15, 2025, 1:00 – 4:00 PM CT (Durant, OK)
- Tuesday, December 16, 2025, 1:00 – 4:00 PM MT (Denver, CO)
- Wednesday, December 17, 2025, 1:00 – 4:00 PM PT (San Diego, CA)
- Tuesday, January 6, 2026, 1:00 – 4:00 PM PT (Seattle, WA)

Comments:

- Comment submissions close on February 9th, 2025.

Other Upcoming Events:

- December 17: NCUIH Monthly Policy Workgroup (virtual)

About NCUIH

The National Council of Urban Indian Health (NCUIH) is a national representative for the 41 Urban Indian Organizations contracting with the Indian Health Service under the *Indian Health Care Improvement Act*. NCUIH is devoted to the support and development of high quality and accessible health and public health services for American Indian and Alaska Native people living in urban areas.

NCUIH respects and supports Tribal sovereignty and the unique government-to-government relationship between our Tribal Nations and the United States. NCUIH works to support those federal laws, policies, and procedures that respect and uplift Tribal sovereignty and the government-to-government relationship. NCUIH does not support any federal law, policy, or procedure that infringes upon or in any way diminishes Tribal sovereignty or the government-to-government relationship.