

Ensuring Tribal Sovereignty and Delivery on Trust and Treaty Obligations for Healthcare Are Protected in the Administration's Implementation of Its Executive Orders and Priorities

UIO Leader Talking Points February 2025

Topline Ask: Tribal Nations' exercise of sovereignty and the United States' delivery on its trust and treaty obligations to Tribal Nations, Tribal Citizens, and Tribal Communities must not become collateral damage in the Administration's implementation of its priorities.

1. Tribal Nations, Tribal Citizens, and Tribal Communities Have a Unique Political Status.

- Tribal Nations are **inherently sovereign governments**, as long recognized by the United States and supported by international law principles.
- Tribal Nations have **political relationships** with their citizens and are important governmental and economic **partners** to surrounding communities.
- Tribal Nations also have **government-to-government political relationships** with the United States.
- And the United States owes **trust and treaty obligations** to Tribal Nations and Tribal citizens.
- U.S. Supreme Court decisions, congressional acts, and presidential orders have consistently reaffirmed the **legal and political status** of Tribal Nations and Tribal citizens and communities, including recognizing that delivery on trust and treaty obligations **does not amount to racial discrimination** against others under equal protection principles. The relationship between Tribes and their citizens and the United States **is not race-based**.
- *Call to Action: Continue to **recognize** Tribal Nations as sovereign governments, and support clear directives and actions that **reinforce** the political status of Tribal Nations, Tribal citizens, and Tribal communities.*

2. Federal Funding for Tribal Health Programs and Urban Indian Organizations Is Legally Mandated and Must Not Be Delayed or Reallocated.

- All federal funding for Tribal health programs and Urban Indian Organizations (UIOs) is part of the United States' **trust and treaty obligations**, and thus this funding is **legally mandated**.
- The Indian Health Care Improvement Act recognizes that Tribal health programs and UIOs support the federal government in fulfilling its trust obligation to provide health care services to Tribal citizens. The IHCA serves as an **independent legal mandate** for these programs as well.
- Funding Tribal Health programs and UIOs should **not be considered discretionary spending**. This includes federal funding used—and federal employees necessary—for services the federal government delivers to Tribal communities and Tribal citizens.
- In fact, on February 6th, Sean Keveney, Acting General Counsel for the Department of Health and Human Services, issued a note to HHS Chief of Staff Heather Flick stating that the EO titled “Ending Radical and Wasteful DEI Programs and Preferencing” does not apply to programs or activities of HHS that affect or Serve American Indian or Alaska Native people.
- *Call to Action: As a UIO providing essential health care services to Tribal citizens, [UIO name] urges the Administration to direct HHS Acting Secretary Dorothy Fink to issue a memorandum reaffirming the Acting General Counsel's statement that the Executive Order on DEI does not apply to HHS programs that affect or serve American Indian and Alaska Native people, ensuring that these programs remain fully operational and unaffected.*
- *Call to Action: We also urge the Administration to ensure federal funding for Tribal health programs and UIOs is not **paused, reallocated, reclassified, or deprioritized** when implementing any Executive Order or other Administration priority. Do not create **unnecessary bureaucratic hurdles** that disproportionately impact Tribal health programs or UIOs. Ensure that, in limiting the federal workforce, **sufficient federal employees** are available to deliver on all trust and treaty obligations.*

3. The Administration Must Engage in Tribal Consultation Directly with Tribal Governments.

- Executive Orders, statutes, and other United States legal mandates, require the United States to engage in formal **Tribal consultation** with Tribal Nations on **any policy or action that may affect Tribal Nations**.
- Tribal Nations have stated that Tribal Consultation has yet to occur during this Administration.
- [UIO name] respects and supports Tribal sovereignty and the unique government-to-government relationship between our Tribal Nations and the United States.
- *Call to action: [UIO name] requests that the Administration ensure Tribal consultation requirements are upheld at all levels of government.*
- Additionally, the Indian Health Care Improvement Act requires the Indian Health Service to confer with UIOs "to the maximum extent practicable" on matters related to carrying out the Act and the Indian Health Manual requires that IHS confer with UIOs whenever an "event or issue that significantly affects one or more UIOs" arises.
- *Call to action: As a UIO providing essential health care services to Tribal citizens, [UIO name], requests that the Administration ensure that the Indian Health Service upholds and respects urban confer requirements, by conferring with UIO leaders on the policies and priorities of the Service as soon as possible.*
- UIOs support this Administration's efforts to **alleviate burdensome regulations** and other barriers that hinder the fulfillment of the trust responsibility to provide health care services to Tribal citizens, but these efforts must be developed in **close consultation** with Tribal Nations, as well as through confer with UIOs to ensure there are no unintended consequences.