IMPACT OF FEDERAL FUNDING PAUSES ON URBAN INDIAN ORGANIZATIONS

What are Indian Health Service funded Urban Indian Organizations?

Urban Indian Organizations (UIOs) were created by urban American Indian and Alaska Native people, with the support of Tribal leaders, starting in the 1950s in response to severe problems with health, education, employment, and housing caused by the federal government's forced relocation policies.

Congress formally incorporated UIOs into the Indian Health System in 1976 with the passage of the Indian Health *Care Improvement Act* (IHCIA).¹ UIOs are an integral part of the Indian health system, comprised of the Indian Health Service, Tribes, and UIOs.

UIOs are required by law to have a Native-controlled Board of Directors and provide for the maximum participation of Native groups and individuals.

There are four different UIO facility types, including full ambulatory, limited ambulatory, outreach and referral, and outpatient and residential alcohol and substance abuse treatment. The forty-one (41) UIOs receiving grants under the IHCIA operate over eighty-five (85) facilities in thirty-eight (38) urban areas in eleven (11) of twelve (12) Indian Health Service (IHS) areas. UIOs serve patients from over 500 federally recognized Tribes² and provide critically needed primary care, behavioral health, traditional medicine, and social and community services to American Indians and Alaska Natives living in urban areas.

About this Data

The National Council of Urban Indian Health (NCUIH) conducted a survey to assess the impact of large-scale federal funding disruptions on UIOs. This survey was originally designed and distributed to determine the potential effect of the Office of Management and Budget's (OMB's) now rescinded Memorandum M-25-13.³ UIO leaders were invited to participate, providing insights into the expected consequences of large-scale federal funding disruptions on their organizations' operations and services. The survey, distributed on January 29, 2025, employed a mixed-method approach using Oualtrics and email submissions. It included open-ended and multiple-choice questions to gather data on operational impacts, financial status, and payment system access. NCUIH received survey responses from twenty (20) of the forty-one (41) UIOs.



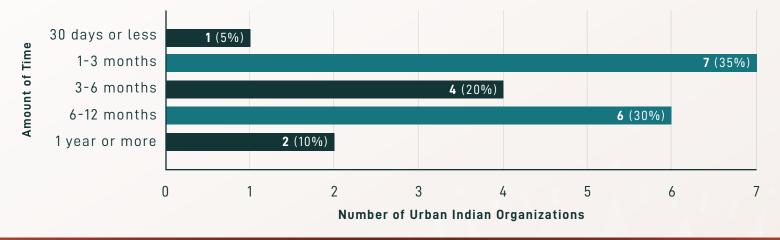
Formulation_Reports_Calendar_Year_2021.pdf. 3. Memorandum from Matthew J. Vaeth, Acting Dir., Off. of Mgmt. & Budget to Heads of Exec. Dep't & Agencies (Jan. 27, 2025), https://acrobat.adobe.com/id/urn:aaid:sc:va6c2:916d4e83-d460-40c3-aaf4-8745b170b4f1.

SURVEY RESULTS

Operational Sustainability

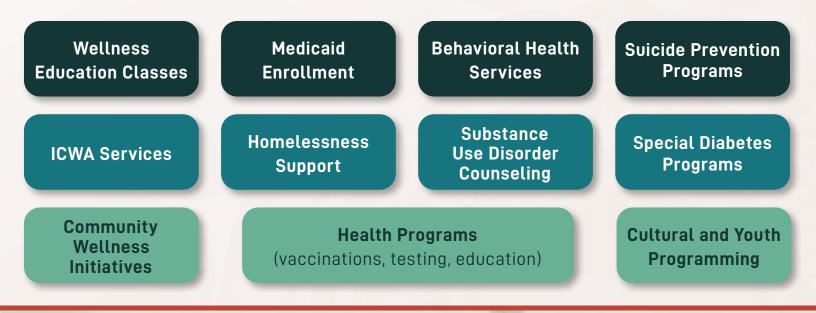
Expected operational sustainability for UIOs in the absence of federal funding varied. Over half of UIOs would not be able to sustain operations beyond six months.

How long can your organization sustain operations without drawing down on federal funds?



SERVICE DISCONTINUATION

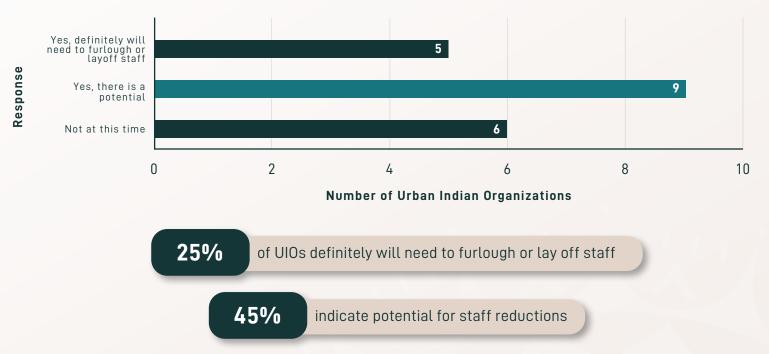
Over half of UIOs anticipated discontinuing critical services if federal funding disruptions were to persist. Potentially discontinued services include:





STAFF LAYOFFS AND FURLOUGHS

Most UIOs anticipated staff reductions if funding federal funding disruptions were to persist: Anticipated Staff Reductions in Federal Funding Disruptions were to Persist



Remaining organizations uncertain or not planning layoffs at this time.

KEY CONCERNS



National Council of Urban Indian Health