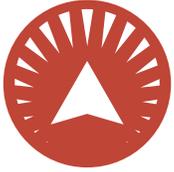




## URBAN CONFER

### THE SITUATION



An Urban Confer is an established mechanism for dialogue between federal agencies and Urban Indian Organizations (UIOs). Urban Confer policies are a response to decades of deliberate federal efforts (i.e., forced assimilation, termination, relocation) that have resulted in 70% of American Indian/Alaska Native (AI/AN) people living outside of Tribal jurisdictions, thus making Urban Confer integral to address the care needs of most AI/AN persons.

### WHAT'S THE PROBLEM?

- ➔ Only the Indian Health Service (IHS) has a legal obligation to confer with UIOs, which has been problematic due to the COVID-19 pandemic.
- ➔ Department of Health and Human Services (HHS) have been operating as if only the IHS has a trust obligation to AI/AN persons, causing an undue burden in conveying UIO needs to agencies.
- ➔ Urban Indian Organizations need pathways for direct communication with agencies that impact urban Indian health, especially during public health crises.

### EXAMPLE

**Absent an Urban Confer policy, the U.S. Department of Health and Human Services (HHS) provided no notice to UIOs that they were required to make a selection for COVID-19 vaccine distribution until the day of the deadline.**

- ➔ Absent a confer policy, several agencies rejected repeated attempts to convene UIOs and agencies to discuss critical urban Indian health issues.
- ➔ An Urban Confer policy at HHS will not supplant or otherwise alter Tribal Consultation and the government-to-government relationship between Tribes and HHS.
- ➔ Failure to communicate about policies impacting urban Indians is not only inconsistent with the government's responsibility, but it's contrary to sound public health policy.

### WHY SHOULD AMERICANS CARE?

COVID-19 vaccine allocation is a recent example of a consequence resulting from a nonexistent Urban Confer policy. Despite Executive, Congressional, and Tribal support for UIOs to be included in vaccine allocations, HHS only initiated communications with Tribal Nations. Exclusion of health care providers to urban Indians from agency discussions undermines fiduciary obligations to ensure health care access to urban AI/AN populations when lack of access results in deaths. Without these Urban Confer policies in place, 70% of AI/AN persons have been excluded from critical agency decisions on Indian health care, a breach of the federal trust obligation.

### FACT



National Congress of American Indians

In November 2020, the National Congress of American Indians (NCAI) passed a resolution to "Call for the U.S. Department of Health and Human Services (HHS) Secretary to Implement an Urban Confer Policy Across the Department and its Divisions" showing broad support among stakeholders in Indian Country.





### WHAT'S CONGRESS DOING?

The Urban Indian Health Inclusion Act codifies the intent of the Federal Trust Responsibility to ensure equitable health care access to AI/AN persons by amending legislative text in Section 514, Subsection (b) of the Indian Health Care Improvement Act (25 U.S.C. § 1660d) (IHCIA) by striking "the Service confers" and inserting "both the Department and Service confer." This legislative revision is an attempt to bring UIOs to the table to address UIO needs in future administration of public health policies that impact urban Indian health through mandatory Urban Confer policies.

### HOW DO WE MOVE FORWARD?

An Executive Order can easily be overturned by a succeeding president. Policies that mandate Urban Confer at HHS must be enacted into law. The legislation will require agencies and offices within the HHS to confer with Urban Indian Organizations (UIOs) on policies and initiatives related to healthcare for urban American Indians and Alaska Natives. Such support in this act of legislation will help Congress to fulfill its fiduciary obligations to all AI/AN people.

**Cosponsor the *Urban Indian Health Confer Act***

