[INSERT DATE]

The Honorable John Tester

Chair, Senate Committee on Indian Affairs

838 Hart Senate Office Building

Washington, DC 20510

The Honorable John Barrasso

Vice Chair, Senate Committee on Indian Affairs

838 Hart Senate Office Building

Washington, DC 20510

Dear Chairman Tester and Vice Chairman Barrasso:

On behalf of the **[INSERT NAME OF TRIBE OR ORGANIZATION]** we offer this letter of support for S. 1570, the Indian Health Service Advance Appropriations Act of 2013 which provides advance appropriations for the Indian Health Service (IHS). **[INSERT NAME OF TRIBE OR ORGANIZATION]** believes that providing appropriations one year in advance will enable the IHS to better serve American Indian/Alaska Native (AI/AN) communities and would help ensure that the Government meets its trust obligation to Native people. Specifically, IHS and Tribally run programs would benefit from improved budgeting, retention, recruitment provision of services, facility maintenance and construction efforts.

Since FY 1998, appropriated funds for medical services and facilities through IHS have not been provided before the commencement of the new fiscal year, causing IHS and Tribal providers great challenges in planning and managing care for AI/ANs. Although the IHS budget has increased by an historic 29% since 2008, this equates to an average of 7.25% per year, barely enough to cover medical and non-medical inflation and the cost of contract health care for our growing population. Additionally, when automatic budget rescissions and sequestration are taken into account, IHS has lost $240 million since FY 2011. Both serious budgetary increases and changes to resources supporting this health care system are necessary if we are going to effectively address the growing gap in health disparities, which has resulted in early death, and preventable, expensive chronic care costs for AI/ANs of all ages.

The lateness in enacting a final budget ranges from five days (FY 2002) to 197 days (FY 2011), making quality budget planning almost impossible. Health care services in particular require consistent funding to be effective. In FY 2010, the Veterans Administration (VA) medical care programs achieved advanced appropriations. The fact that Congress has implemented advance appropriations for the VA medical programs demonstrates the importance of advanced appropriations for direct health service agencies. Just as the veterans groups were alarmed at the impact of delayed funding upon the provision of health care to veterans and the ability of VA to properly plan and manage its resources, Tribes and Tribal organizations have those concerns about the IHS health system.

If IHS funding was on an advanced appropriations cycle, Tribal health care providers, as well as the IHS, would know the funding a year earlier and their health care services would not be stymied by continuing resolutions. This would lead to greater outcomes for patients in IHS, Tribal and Urban (I/T/U) programs. For example, hospital administrators would have the ability to continue treating patients without wondering if they had to de-fund facilities or programs. Additionally, IHS administrators would not waste valuable resources in an agency funded at only 56 percent of need by re-allocating the budget each time Congress passed a continuing resolution. Tribal health providers would know in advance how many physicians and nurses they could hire without wondering if funding for positions would be available from month to month.

**(If possible please add a few sentences and tell your story of how funding delays impact the services that you provide)**

We appreciate the opportunity to offer this letter of support for S. 1570. Should you have questions or need additional information, please do not hesitate to contact [**INSERT CONTACT NAME]** at [**INSERT CONTACT INFORMATION].**

Sincerely,

[**INSERT NAME AND TITLE**]