

National Budget Formulation for the Fiscal Year 2017 Budget



California Representatives

Primary Tribal Representative

Stacy Dixon, Chairman

Susanville Indian Rancheria

Alternate Tribal Representative

Mark Romero, Chairman

Mesa Grande Band of Diegueno Mission
Indians

IHS Consultant

Beverly Miller

California Area Indian Health Service

The National Tribal Budget Formulation Indian Health Service Fiscal Year 2017 Budget

- **Tribal Leaders on the National Tribal Budget Formulation Workgroup, representing all 12 IHS Areas, met on February 10-11, 2015, in Washington D.C.**
- **Purpose: To develop the national Indian Health Service budget**
- **Theme for the fiscal year 2017 budget:**
 - **“Turning the Corner in Indian Health Treaty and Trust Obligations: Writing a new future for American Indians and Alaska Natives”**
- **The IHS FY 2017 Budget was presented to Secretary Burwell on February 26, 2015**

The National Tribal Budget Formulation Workgroup's Recommendations on the Indian Health Service Fiscal Year 2017 Budget

- 1. Phase In Full Funding of IHS – total Tribal Needs Budget of \$29.96 Billion Over 12 Years**
 - \$15.82 billion for Medical Services
 - \$ 1.66 billion for Dental and Vision Services
 - \$ 3.71 billion for Community and Public Health Services
 - \$ 8.77 billion for Facility Upgrades and Upfront Costs (non-recurring investments)

The National Tribal Budget Formulation Workgroup's Recommendations cont'd.

2. Present a 22% increase in the overall IHS budget from the FY 2016 President's Budget, request planning base for a total of \$6.2 billion in FY 2017

	In thousands
FY 2016 President's Budget	\$5,102,985
Current Services increase	\$ 157,440
Binding Agreements	\$ 325,000
Program Expansion (top 5 national priorities)	
Hospital & Health Clinics	\$ 200,000
Purchased/Referred Care	\$ 200,000
Alcohol & Substance Abuse	\$ 77,600
Mental Health	\$ 67,496
Dental Services	\$ 31,185
Urban Health	\$ 10,000
Maintenance & Improvement	\$ 21,589
Other budget Recommendations	\$ 6,703
	\$6,200,00

The National Tribal Budget Formulation Workgroup's Recommendations cont'd.

- 3. Restore Cuts/Shortfalls in FY 2013-16 resulting from sequestration, in adequate increases to cover Congressionally mandated budget categories including Contract Supports Costs (CSC), and no provision for inflation for Current Services & Binding Obligations**
- 4. Advocate that Tribes and Tribal programs be permanently exempted from sequestration**
- 5. Support the President's proposal to reclassify CSC from the discretionary to the mandatory appropriation and to be reauthorized every 3 years**
- 6. Request a higher percentage budget increase in the Hospitals & Clinics budget line to allow flexible service expansion funding which can be used to fund local budget priorities**
- 7. Provide an additional \$300 million to implement the provisions authorized in the Indian Health Care Improvement Act (IHCIA)**