Dear Tribal Leader and Urban Indian Organization Leader:

On behalf of the Indian Health Service (IHS), I am providing an update on short-term continuing appropriations for fiscal year (FY) 2020 that affect Tribal Health Programs with performance periods starting within the current continuing resolution (CR) period for October 1, 2019, through December 20, 2019.

The IHS is paying Tribal Health Programs with performance periods starting within the CR period up to the full FY 2019 base Secretarial amount. The IHS is making payments consisting of base Secretarial amounts as expeditiously as possible to Tribal Health Programs. However, for program funding that the IHS distributes based on a formula, using either a workload or a level of need criteria (or a combination thereof), the IHS will make payments after it receives a final FY 2020 appropriation and completes distribution decisions. The *IHS Headquarters Programs, Services, Functions, and Activities Manual*, which describes programs that use formulas (e.g., Sanitation Facilities Construction), is available on the IHS Web site at: https://www.ihs.gov/sites/selfgovernance/themes/responsive2017/display_objects/documents/2002-PSFA-Manual.pdf. If this final FY 2020 appropriation differs from FY 2019 funding levels, the IHS will adjust funding for Tribal Health Programs accordingly. Adjustments resulting in decreases will require Tribal Health Programs to return applicable funding to the IHS.

Programs operated by the IHS, including contracts to Urban Indian Organizations, will continue to receive funding at the current CR funding level of 22.13 percent through December 20, 2019. The amount of funds available under the CR period for programs operated by the IHS or Urban Indian Organizations will not be reduced as a result of the full FY 2019 base Secretarial amount payments to Tribal Health Programs.

In the event a subsequent CR extends into January 2020 or beyond, the IHS anticipates providing payments to Tribal Health Programs on calendar year, or other cycles affected by a short-term CR. I appreciate your continued support as we work through this new process.

Sincerely,

/Michael D. Weahkee/

RADM Michael D. Weahkee, MBA, MHSA
Assistant Surgeon General, U.S. Public Health Service
Principal Deputy Director

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1 The term “tribal health program” means an Indian tribe or tribal organization that operates any health program, service, function, activity, or facility funded, in whole or part, by the Service through, or provided for in, a contract or compact with the Service under the Indian Self-Determination and Education Assistance Act. 25 U.S.C. § 1603(25).