



## **Indian Health Service Press Release**

**August 2, 2016**  
**FOR IMMEDIATE RELEASE**  
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### **IHS Awards \$767,000 to Seven Tribes and Tribal Organizations for Self-Governance Planning and Negotiation Activities**

The Indian Health Service has awarded 2016 Planning and Negotiation Cooperative Agreement awards to seven Tribes and Tribal Organizations. These annual IHS cooperative agreement awards support tribal organizations with the planning and preparation necessary to assume responsibility for providing health care to their tribal members.

Tribes have the right to assume responsibility for providing health care to their members and to operate and manage health care programs or services previously provided by IHS, subject to certain requirements.

“These cooperative agreements announced today underscore the continuing IHS commitment to tribal self-governance. IHS shares with tribes the goal of providing quality health care to American Indian and Alaska Native patients and provides technical assistance and funding to Tribes interested in exploring self-governance in order to support this shared goal,” said IHS Principal Deputy Director Mary Smith. “The partnership with IHS and self-governance tribes is a shining example of cooperation in providing access to quality health care for American Indians and Alaska Natives.”

The Planning Cooperative Agreement helps tribes with the planning phase of the self-governance program, which includes legal and budgetary research and internal tribal government planning and organization preparation relating to the administration of health care programs. The following Tribes and Tribal Organizations received funding for planning activities:

- Salt River Pima-Maricopa Indian Community, Arizona – \$120,000
- Ak-Chin Indian Community, Arizona – \$120,000
- White Earth Band of Chippewa Indians, Minnesota – \$120,000
- Northwest Portland Area Indian Health Board, Oregon – \$120,000
- Pinoleville Pomo Nation, California – \$119,328
- Lake County Tribal Health Consortium, Inc., California - \$120,000

The Negotiation Cooperative Agreement assists tribes to defray the costs related to preparing for and conducting self-governance program negotiations. Negotiations provide an opportunity for the tribal and federal negotiation teams to work together in good faith to enhance each self-governance agreement. The following Tribe received funding to minimize negotiation costs:

- Ponca Tribe of Indians of Oklahoma – \$48,000

More than one-third of the total annual IHS funding for American Indian and Alaska Native health is now transferred directly to tribes to operate and manage health care programs or services previously provided by IHS, constituting approximately \$1.8 billion of the IHS budget. The IHS Tribal Self-Governance Program includes the participation of [354 of the 567 federally recognized tribes](#), which have negotiated 90 compacts and 115 funding agreements under the authority of Title V of the Indian Self-Determination and Education Assistance Act. Tribes have the option to receive their health care directly from IHS or by exercising their self-determination and self-governance authorities authorized by the Indian Self-Determination and Education Assistance Act, or any combination thereof. By law, IHS carries out its responsibility to facilitate the transfer and support the achievement of tribal health goals and objectives, which includes [technical assistance and funding opportunities](#).

The [IHS Office of Tribal Self-Governance](#) develops and oversees the implementation of tribal self-governance legislation and authorities within the IHS, and provides information, technical assistance and policy coordination in support of IHS self-governance activities, with input from IHS staff and workgroups, tribes and tribal organizations, and the IHS [Tribal Self-Governance Advisory Committee](#).

The IHS, an agency in the U.S. Department of Health and Human Services, provides a comprehensive health service delivery system for approximately 2.2 million American Indians and Alaska Natives.

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