PHOENIX AREA REPRESENTATIVES:
Ms. Ophelia Watahomigie-Corliss    Ms. Janet Davis
Council Member                Council Member
Havasupai Tribe               Pyramid Lake Paiute Tribe

CHARGE or PURPOSE OF National Tribal Advisory Committee – Behavioral Health (NTAC-BH):
The NTAC-BH is an advisory body to the IHS Division of Behavioral Health (DBH) and the IHS Director. Enhance the government-to-government relationship between IHS and Tribal governments. Advise the IHS Director of Behavioral Health on improving programming and service delivery and setting national behavioral health priorities. Provide guidance and recommendation on programmatic issues that affect the delivery of behavioral health care.

SUMMARY OF ACTIVITY, ACCOMPLISHMENTS AND/OR ACTIONS (Brief one page bulleted points):
• In 2018, the NTAC made recommendations to RADM Weahkee regarding the IHS DBH behavioral health funding and initiatives:
  o Substance Abuse and Suicide Prevention Program (SASPP)
  o Domestic Violence Prevention Program (DVPP)
  o Zero Suicide Initiative (ZSI)
• The NTAC held two (2) in-person meetings:
  o March 13, 2019 (Alpine, CA; joint meeting with SAMHSA)
  o June 17, 2019 (Rockville, MD; meeting with IHS Principal Deputy Director, RADM Weahkee and IHS Senior Leadership)
• The NTAC recommendations were made in response to the Consolidated Appropriations Act Explanatory statement that encouraged IHS to provide behavioral health grant funding through contracts and compacts authorized by the Indian Self-Determination and Education Assistance Act rather than through grant instruments to ensure that Contract Support Costs are available.
• June 17th NTAC Meeting Update:
  o Seven NTAC members along with IHS staff and representatives from NIHB were present at the 1-day meeting. NTAC members received a presentation on the opioid crisis as well as an update on discussions between the IHS and SAMHSA. The afternoon portion of the meeting was held with RADM Weahkee to discuss the NTAC Behavioral Health Initiative funding recommendations.
  o RADM Weahkee indicated that he would issue a Dear Tribal Leader Letter and a Dear Urban Leader Letter for Tribal consultation and urban confer that would allow for an 60-day open comment period on the NTAC Behavioral Health Initiative funding recommendations. The comment period is now open and letters are available on the IHS webpages (letters dated August 2, 2019):
    ▪ DTTL: https://www.ihs.gov/newsroom/triballeaderletters/
    ▪ DULL: https://www.ihs.gov/newsroom/urbanleaderletters/
Tribal consultation and confer would also be conducted on the IHS opioid grant funding and evaluation process. The comment period is now open and letters are available on the IHS webpages (above). Letters for the opioid funding consultation are dated July 26, 2019.
Dear Tribal Leader and Urban Indian Organization Leader:

As a next step of the Tribal Consultation and Urban Confer activity related to the distribution mechanism for behavioral health initiative funding, I am writing to announce a 60-day comment period to seek your input and comments on recommendations by the Indian Health Service (IHS) National Tribal Advisory Committee on Behavioral Health (NTAC) based on the input gathered from the initial comment period that closed in August 2018.

As part of this Tribal Consultation and Urban Confer activity, I tasked the NTAC to review the input gathered from the initial comment period and to develop recommendations for the IHS to consider to address the explanatory statement in the Consolidated Appropriations Act of 2018, which encourages the IHS to transfer behavioral health initiative funding through Indian Self-Determination and Education Assistance Act compacts and contracts (as opposed to grants) to ensure that contract support costs are authorized and payable. Since October 2018, the NTAC convened three meetings to complete this task.

On June 17, 2019, the NTAC presented its recommendations to me and senior staff in Rockville, Maryland. Attendees included leadership from other IHS Tribal advisory committees, such as the Tribal Self-Governance Advisory Committee and the Direct Service Tribes Advisory Committee, and representatives from the National Council of Urban Indian Health and the National Indian Health Board.

I have enclosed the NTAC recommendations for your review and comment. Meeting agendas and summaries from the NTAC sessions are also available on the IHS Web site at https://www.ihs.gov/dbh/consultationandconfer/moreinformation/.

Written comments will be accepted by e-mail or postal mail. The deadline to provide comments is Tuesday, October 1, 2019.

Please send comments by E-MAIL to: consultation@ihs.gov or urbanconfer@ihs.gov

Subject Line: IHS Behavioral Health Funding

Please send comments by POSTAL MAIL to: RADM Michael D. Weahkee
Principal Deputy Director
Indian Health Service
5600 Fishers Lane, Mail Stop: 08E86
Rockville, MD  20857

Attention: IHS Behavioral Health Funding
A Tribal Consultation and Urban Confer comment summary is provided online at https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2018_Letters/Enclosure_BH_InitiativeFundingSummary_12112018.pdf.

I look forward to your input and comments on the NTAC recommendations.

Thank you for your support and partnership in addressing important behavioral health issues in our communities. If you have questions, please contact Ms. Michele Muir-Howard, Staff Analyst, IHS Division of Behavioral Health, by telephone at (301) 443-2038, or by e-mail at michele.muir-howard@ihs.gov.

Sincerely,

/Michael D. Weahkee/

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

Enclosure: National Tribal Advisory Committee on Behavioral Health (NTAC) Recommendations
March 14, 2019

Rear Admiral Michael Weahkee
Principal Deputy Director, Indian Health Service
5600 Fishers Lane
Rockville, MD 20857

RE: National Tribal Advisory Committee on Behavioral Health (NTAC) Recommendations

Dear Principal Deputy Director Weahkee,

On behalf of the National Tribal Advisory Committee on Behavioral Health (NTAC), we submit the following recommendations in response to your May 18, 2018 Dear Tribal Leader Letter (DTLL) initiating Tribal consultation and Urban Conference on the funding mechanism to distribute behavioral health initiatives currently funded through grants. NTAC believes this action brings IHS into improved adherence to the Trust Responsibility between the Federal government and Tribes.

NTAC is the advisory body to the IHS Division of Behavioral Health and to the Director of the Indian Health Service and is comprised of elected Tribal leaders or designees selected to represent the twelve IHS service areas. NTAC provides an opportunity for meetings between committee members and Federal partners. The aim of NTAC is to provide guidance and recommendations on issues that affect the delivery of behavioral health care for American Indian and Alaska Natives.

As Tribal leaders working nationally to address the complex behavioral health issues burdening AI/AN communities, we have the responsibility to provide input on funding for programs and ways to ensure access to care. Our primary obligation is to guarantee the funding is distributed in the most effective and efficient way possible to help reduce the burden of suicide, substance use disorder, and domestic violence in Indian Country.

The Consolidated Appropriations Act of 2018 explanatory statement encourages the Indian Health Service (IHS) to transfer behavioral health initiative funding through the Indian Self-determination and Education Assistance Act (ISDEAA) compacts and contracts rather than through grants. This impacts the current funding methodologies via the grant process. During our meeting held on December 20, 2018 in Albuquerque, NM it was identified that the numbers described in your DTLL included congressional set asides (i.e. city of Gallup, YRTC, PARD, and BH2I) totaling $10.7 million that is not eligible for Tribal Consultation. NTAC recommendations are based on the remaining $48.5 million in the chart below.
<table>
<thead>
<tr>
<th>Substance Abuse &amp; Suicide Prevention Program (SASPP)</th>
<th>$31,975,137</th>
<th>Recommended Funding Amount</th>
<th>NTAC Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tribal Grants and Program Awards -</td>
<td>$24,918,083</td>
<td>$26,011,882</td>
<td>Distributed through new methodology. Increase funding to $26,011,882</td>
</tr>
<tr>
<td>UIOs -</td>
<td>$3,054,164</td>
<td>$3,054,164</td>
<td>No change to the methodology, however, update UIO definition.</td>
</tr>
<tr>
<td>National Management</td>
<td>$4,002,890</td>
<td>$610,677</td>
<td>Recommend a $610,677 budget to fund the Suicide Prevention Coordinator, the National SASPP Coordinator and the Education Development Center for Zero Suicide. $758,000 to be reinvested into Tribal Epidemiology Centers (TECs). $328,230 to be reinvested into Tribal Grants and Program Awards.</td>
</tr>
<tr>
<td>HQ Staff (9FTE)</td>
<td>$1,386,230</td>
<td>$300,000</td>
<td>Decrease APOs from 4 to 0. Keep the Suicide Prevention Coordinator and the National SASPP Coordinator. Decrease HQ staff funding to $300,000.</td>
</tr>
<tr>
<td>NIHB</td>
<td>$150,000</td>
<td>$250,000</td>
<td>$250,000; with increased scope of work to current cooperative agreement</td>
</tr>
<tr>
<td>Tribal Epi Centers</td>
<td>$1,242,000</td>
<td>$2,000,000</td>
<td>Increase funding to $2,000,000. Scope of work will increase to include data coordination, grants management, and reports to Tribes.</td>
</tr>
<tr>
<td>AASTEC Cooperative Agreement</td>
<td>$215,000</td>
<td>$0</td>
<td>These funds should be reallocated to Tribal Grants and Program Awards</td>
</tr>
<tr>
<td>NCUIH</td>
<td>$75,000</td>
<td>$0</td>
<td>These funds should be reallocated to Tribal Grants and Program Awards</td>
</tr>
<tr>
<td>Education Development Center for Zero Suicide</td>
<td>$310,677</td>
<td>$310,677</td>
<td>No change</td>
</tr>
<tr>
<td>HORNE Creative Group</td>
<td>$107,446</td>
<td>$0</td>
<td>Reinvest $107,446 back into Tribal Grants and Program Awards</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Domestic Violence Prevention Program (DVPP)</th>
<th>$12,967,278</th>
<th>Recommended Funding Amount</th>
<th>NTAC Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tribal Grants and Program Awards</td>
<td>$9,775,838</td>
<td>$10,443,700</td>
<td>Distributed through new methodology. Increase funding to 10,443,700</td>
</tr>
<tr>
<td>UIOs</td>
<td>$1,400,000</td>
<td>$1,400,000</td>
<td>No change to the methodology, however, update UIO definition.</td>
</tr>
<tr>
<td>National Management</td>
<td>$1,791,440</td>
<td>$1,123,578</td>
<td>Decrease the number of APOs from 4 to 0. This will decrease National Management funding by $667,862 leaving $1,123,578. The</td>
</tr>
</tbody>
</table>
$667,862 should be moved to Tribal Grants and Program Awards.

<table>
<thead>
<tr>
<th></th>
<th>Recommended Funding Amount</th>
<th>NTAC Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>NIHB</td>
<td>$50,000</td>
<td>No change</td>
</tr>
<tr>
<td>Tribal Epi Centers</td>
<td>$828,000</td>
<td>No change</td>
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</table>

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<thead>
<tr>
<th>Zero Suicide Initiative (ZSI)</th>
<th>$3,600,000</th>
<th>Recommended Funding Amount</th>
<th>NTAC Recommendations</th>
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<tbody>
<tr>
<td>Tribal Grants and Program Awards</td>
<td>$3,200,000</td>
<td>$3,497,415</td>
<td>Increase funding to $3,497,415</td>
</tr>
<tr>
<td>National Management</td>
<td>$400,000</td>
<td>$0</td>
<td>This funding should be reallocated to Tribal Grants and Program Awards.</td>
</tr>
<tr>
<td>AASTEC Cooperative Agreement</td>
<td>$50,000</td>
<td>$0</td>
<td>This funding should be reallocated to Tribal Grants and Program Awards.</td>
</tr>
<tr>
<td>Education Development Center’s Zero Suicide Training Contract</td>
<td>$102,585</td>
<td>$102,585</td>
<td>No change</td>
</tr>
</tbody>
</table>

NTAC is submitting recommendations in response to the following We understand that any changes to the current distribution of funding would have an impact on current grantees and may decrease funding in some cases so that more Tribes can receive funding, therefore, NTAC recommends the following:

- Distribution methodologies
  - Continue national distribution methods of allocating funds to all 12 IHS areas using the current funding formula, permitting Areas to determine distribution methodology appropriate to that area through fiscal year 2020. Funding formulas and mechanisms
    - Allow current grantees to continue as is through 2020 (current funding cycle) and make any changes to funding effective in the new funding cycle beginning in 2021.
- Funding for National Management
- Funding for National Indian Health Board
- Funding for Urban Indian Organizations (UIO)
  - Continue funding UIO grantees at the current level through grants, cooperative agreements, annual contracts and any other funding mechanism;
- Review of all IHS behavioral health funding designated for national management with the intent to transfer all non-essential expenditures for distribution through the new funding methodology.

NTAC has reviewed and discussed the recommendations based off the majority input from each of our service areas. We support the sovereignty of all Tribal governments and choose to exercise our inherent right. NTAC respectfully requests a face to face meeting with you for further discussion.
Implementing these recommendations will support Tribal sovereignty. If you have any questions or require additional information please contact me at Theresa.Galvan@nndoh.org or (928) 871-6235.

In Health,

/s/ Theresa Galvan
Theresa Galvan
Tribal Co-Chair, National Tribal Advisory Committee

/s/ Jennifer Yeoman
Jennifer Yeoman,
Council Member - Alaska Area

/s/ Lana Causley
Lana Causley
Tribal Representative – Bemidji Area

/s/ Cassandra McGilbray
Cassandra McGilbray
Sr. Advisor to Secretary of Family Services, Oklahoma Area

/s/ Ophelia Watahomigie-Corliss
Ophelia Watahomigie-Corliss,
Councilwoman – Phoenix Area

/s/ Cassandra Sellards Reck
Cassandra Sellards Reck,
Delegate – Portland Area

cc: Members, National Tribal Advisory Committee on Behavioral Health
NIHB