Congressman Greg Stanton House Natural Resources Subcommittee on Indian and Insular Affairs Hearing including the *Stronger Engagement for Indian Health Needs Act* February 5, 2025

Thank you, Chairman Hurd and Ranking Member Leger Fernández, for allowing me to waive on for this significant hearing.

And thank you to our witnesses, for traveling to D.C. and testifying on the important issues before the committee today—providing for Alaska Native veterans, protecting native lands, and – what my bill, the *Stronger Engagement for Indian Health Needs Act* intends to do – elevating the health care needs of Indian Country.

Specifically, my bipartisan bill with Rep. Joyce of Ohio would elevate the Director of the Indian Health Service to the <u>Assistant Secretary</u> of the Indian Health Service within the Department of Health and Human Services.

Under current law, the Director of the IHS does not have certain authorities like pay and hiring authorities which are important for improving employee recruitment and retention... but are reserved for Assistant Secretaries. As an Assistant Secretary, the head of IHS would have these expanded authorities—improving continuity and quality of care provided by its employees.

This is crucial for our native populations in Arizona and across the whole country. Indian health is chronically underfunded. In fact, in fiscal year 2023, the IHS care expenditures were slightly over \$4 thousand per person versus over \$13,400 per person nationwide in 2022. That isn't because Native people are less sick. This means they are receiving less care. Report after report from the National Institutes of Health to the U.S. Commission on Civil Rights cite that understaffing and underfunding of our Indian health system leaves many basic needs in the Native American community unmet, leading to lower life expectancy and disproportionate rates of disease.

The recent Supreme Court ruling in Becerra vs. San Carlos Apache only adds to the uncertainty of IHS's fiscal future making action NOW to add leadership to the IHS so important. And this is a deeply bipartisan issue. The late, great, John McCain introduced this legislation originally in 1994, and during his time in the Senate this bill passed FIVE TIMES as a standalone bill and once more in the Indian Health Care Improvement Act in 2007.

There's even precedent – in 2016, Congress elevated the director of the Substance Abuse and Mental Health Services Administration (SAMHSA) to assistant secretary to respond to the opioid crisis.

I am glad to see Mr. Locklear, interim CEO of the National Indian Health Board, here to testify on this bill today. The NIHB has done so much to empower Native communities to heal, grow, and thrive – including their work in addiction space...combating the opioid and fentanyl epidemics that have had a huge impact in Arizona and in our Native communities.

I know that elevating the Director of the Indian Health Service to the <u>Assistant</u> <u>Secretary</u> of the Indian Health Service will have a huge impact on their organization, their ability to coordinate, and will better help them serve their tribes and communities.

In closing, I want to recognize the leadership of the outgoing Director of the Indian Health Service, Roselyn Tso. She worked tirelessly to improve health outcomes on Native lands, and I thank her for her service. I look forward to working with her successor.

My hope is that, with the passage of the *Stronger Engagement for Indian Health Needs Act*, <u>future</u> leaders at the Indian Health Service will...as Assistant Secretaries...have a direct line of communication to the Secretary on all matters related to Indian health policy – resulting in better care delivery and stronger health outcomes for Indian country.

Thank you, I yield back.