

**Testimony of Martin Harvier, President, Salt River Pima-Maricopa Indian Community
February 26, 2025**

Thank you, Chairman Simpson, Ranking Member Pingree, and Members of the Subcommittee for the opportunity to share our funding priorities for the FY 2026 federal budget. My name is Martin Harvier, President, of the Salt River Pima-Maricopa Indian Community. Today my testimony will focus on programs serving tribal governments including the Indian Health Service, the Bureau of Indian Affairs, and the Bureau of Indian Education, along with other granting agencies like the Environmental Protection Agency.

To start, I want to highlight and emphasize the difference between Diversity, Equity and Inclusion (DEI) efforts and the many programs serving tribes across the nation, that, as a whole, ensure the federal government is meeting its treaty and trust obligations to tribal governments. We greatly appreciate Secretary Burgum's quick acknowledgement and exemption from funding freezes for Department of the Interior programs, and we hope that Congress will include appropriate report language ensuring that tribal programs and tribal preference are not incorrectly flagged or penalized as DEI initiatives.

Indian Health Service

We would like to thank this Subcommittee for its recent, historic investments in the Indian health system. We are also grateful for your bipartisan effort to protect the IHS from cuts during the most recent fiscal years. To build off these victories, I offer the following recommendations for your consideration for FY 2026 appropriations for the IHS.

Permanently Exempt the IHS from Cuts, Sequestrations, Rescissions, and Funding Freezes

The IHS and its Tribal partners under the Indian Self-Determination and Education Assistance Act strive to provide Tribal people with access to high-quality and comprehensive medical services, in line with the federal government's trust and treaty obligations. However, chronic underfunding of the Indian health system has had detrimental impacts on our communities. American Indians and Alaska Natives are disproportionately affected by obesity, diabetes, heart disease, cancer, substance use disorder, and other largely preventable conditions. In our Community, these impacts directly result in an average life expectancy of just 55 years. Just across the reservation border in Scottsdale, Arizona, the average life expectancy is 85 years. We can, and must, do better.

Despite its chronic underfunding, the Indian health system is still at risk of additional budget cuts, sequestrations, rescissions, and funding freezes. As recently as January 2025, Tribal health programs like us feared that our desperately needed funding was frozen when the Office of Management and Budget issued a memorandum pausing federal financial assistance. Similarly, in FY 2024, Congress rescinded \$350 million marked for public health infrastructure from the IHS. In fact, the IHS is the only federally funded service providing direct patient care that is not exempt from sequestration.

Most recently, we understand that the IHS may be included in efforts to trim the federal workforce by terminating employees still in their probationary period. This would be devastating to Indian Country and comes at a time when there is already a more than 30 percent vacancy rate in critical

positions across the IHS. Again, I urge Congress to make it clear that IHS must be exempt from any across-the-board funding freezes, hiring freezes, or workforce reduction efforts due to its role in fulfilling the US treaty and trust responsibility to tribal governments.

Continued Support for Advance Appropriations for IHS

We thank this Subcommittee for its commitment to advance appropriations for the IHS, and we continue to support it in all future fiscal years. We urge the Subcommittee to extend advance appropriations to all IHS accounts, including Electronic Health Records Modernization, Health Care Facilities Construction, and Sanitation Facilities Construction for FY 2026.

Mandatory Funding for Contract Support Costs and 105(l) lease payments

We appreciate the Subcommittee’s commitment to ensuring that Contract Support Costs (CSC) and section 105(l) lease payments are fully funded. However, despite the obligatory nature of these payments, they remain in the discretionary budget, where they continue to take up a larger and larger percentage of overall IHS funding. In FY 2020, the Subcommittee found that “[o]bligations of this nature are typically addressed through mandatory spending, but in this case, since they fall under discretionary spending, they are impacting all other programs funded under the Interior and Environment Appropriations bill, including other equally important Tribal programs.”

This is especially concerning given the recent U.S. Supreme Court, *Becerra v. San Carlos Apache Tribe*, which found that the IHS is required to pay CSC on third-party revenues. This will cause a drastic escalation in the CSC budget, and we are very worried that Congress will cut into other essential Tribal programs to pay for these increases. Indeed, in FY 2024, this Subcommittee approved cuts to Electronic Health Records Modernization, Health Care Facilities Construction, and Sanitation Facilities Construction in part to offset the increases to CSC and section 105(l) leases. To permanently protect the rest of the IHS budget, we ask you to continue to advocate with your colleagues on authorizing committees to enact mandatory appropriations for CSC and 105(l) lease costs.

Adequately fund critical infrastructure investments

We were excited to see that this Subcommittee proposed advance appropriations for Health Care Facilities Construction and Sanitation Facilities Construction in its draft FY 2025 bill. This is a meaningful step toward addressing the severely outdated conditions common in the Indian health system. However, we were disappointed to see the drastic proposed cut to the Electronic Health Records modernization account. Such a cut would effectively halt modernization efforts, which is untenable given the already extremely outdated system the IHS is currently using. Therefore, we request that this Subcommittee restore this account with \$217 million for FY 2026.

Address Staffing Shortages

The Indian health system is chronically understaffed due to a variety of challenges including underfunding and rural location. We thank this Subcommittee for proposing a 12% increase to the Hospitals and Health Clinics line item, which will help ensure Tribal health programs have the funding to offer competitive salaries and benefits. We also urge this Subcommittee to ensure this increase is included in the final bill, also with additional direct resources for staff housing.

Behavioral Health

Our communities, like all of Indian Country, have been devastated by the ongoing fentanyl and opioid epidemic. Nevertheless, funds for these services are extremely limited. For example, in FY 2024, Congress only appropriated \$2 million to fund essential detoxification-related services. That's less than \$1 per IHS patient. We urge the Subcommittee to dedicate resources to detoxification and reemphasize the importance funding for the following accounts— Health Care Facilities Construction, Alcohol & Substance Use, and Mental Health.

Recommendations:

1. Protect the IHS from cuts, rescissions, sequestrations, and freezes.
2. Ensure mandatory funding for contract support costs and section 105(*l*) lease payments.
3. Restore critical infrastructure investments for the Indian health system.
4. Address staffing shortages through adequate funding.
5. Increase funding for behavioral and mental health programs.

Department of the Interior

Support for 105 (L) Leasing Program

The Indian Self-Determination Act (ISDEAA) requires DOI to enter leases to pay for tribally owned or rented facilities used to support activities under ISDEAA agreements. The SRPMIC entered the program in 2022 and currently has 22 lease agreements. However, the administration of timely payments is a concern. For example, FY 2022 – 2024 leases have been executed, however, only \$2,709,542.78 has been distributed leaving the United States **\$13,920,050.44** in arrears. **Recommendation:** Move the *105(l)* lease appropriations from an indefinite discretionary appropriation to mandatory funding, provide Tribes the opportunity to enter in multi-year *105(l)* leases to avoid annual renewals, and allocate enough staff to process and bring to date the current backlog.

Support for the Land Buy-Back Program (LBBP)

The Land Buy-Back Program (LBBP) ended in 2022, leaving tribes without a dedicated federal funding source for land consolidation efforts. The SRPMIC has over 1,000 active allotments within the community boundaries, with almost half being considered highly fractionated (50 or more owners). Without continued land consolidation, fractionation will increase, complicating land management and probates. Indian land consolidation is critical to reducing fractionation, resolving complex probate cases, and ensuring tribes can fully utilize their lands for economic development, housing, and infrastructure. The federal government played a direct role in creating land fractionation through past legacy policies, yet there is currently no long-term funding source to address the problem. Highly fractionated lands cannot be efficiently used for housing, economic development, or governance. **Recommendation:** Congress should provide additional funding for Indian land consolidation efforts.

BIA's Review of Probate Cases Amidst a National Backlog

The SRPMIC has compacted the probate function and is responsible for probate case preparation, inventory and asset verification, and getting cases submitted to the Office of Hearings and Appeals (OHA) for formal probate proceedings. Despite this, BIA requires additional reviews at the regional level, rather than allowing SRPMIC to operate independently, despite SRPMIC staff being fully trained and qualified to perform all required probate functions. During FY2023 and

FY2024 Probate cases were at the regional level for reviews ranging from 1-4 months. **Recommendation:** The SRPMIC should be allowed to submit completed probate cases directly to OHA, eliminating unnecessary BIA oversight at the regional level.

Lengthy Timeframes for Realty Transactions Submitted to the Local BIA Agency Office

The Salt River Agency (SRA) serves the SRPMIC and two other tribes. Due to staffing shortages the Salt River Agency Superintendent is covering two agencies (Pima and Salt River) and is present at SRA only one day per week. As a result, approval for rights-of-way regularly exceeds the 60-day timeframe required under 25 CFR § 169.123, causing significant delays for infrastructure and economic projects. Wait times have significantly worsened since mid-2020, with no clear justification from BIA for the excessive review timelines. **Recommendation:** The BIA must acknowledge the staffing issue and take steps to provide additional staff to reduce realty transaction approval delays.

BIA's Restrictions on TAAMS Access Harm SRPMIC Self-Governance Compacts

The Trust Asset and Accounting Management System (TAAMS) is the federal system used by BIA to manage Trust Assets, Indian land records, including leasing, rights-of-way, and title documents. SRPMIC is seeking the ability to approve the encoding of already BIA-approved title documents in TAAMS within the Business Lease and Right-of-Way modules. Currently, SRPMIC staff already have authority for mortgages, legal documents, and conveyance documents, yet BIA refuses to allow TAAMS for other transactions which creates an unnecessary administrative backlog when it comes to title examination and cleanup efforts. **Recommendation:** The SRPMIC should be permitted to approve the encoding of already BIA-approved title documents in the Business Lease and Right-of-Way modules in TAAMS, reducing delays caused by unnecessary BIA intervention and ensuring policy consistency across all BIA Regions.

Environmental Protection Agency (EPA)

Indian Environmental General Assistance Program (GAP): The Indian Environmental General Assistance Program, commonly referred to as GAP, plays a crucial role in enhancing the capabilities of federally recognized Tribes and intertribal consortia across the United States. This program offers both financial support and technical assistance designed specifically to bolster the ability of these Tribes to implement robust environmental protection initiatives that fall under the legal statutes overseen by the Environmental Protection Agency (EPA).

On February 7, 2023, several EPA Region 9 employees were placed on leave. This development has resulted in a reduction of available staff dedicated to addressing the specific needs of Tribal communities, which may reduce the resources received. The SRPMIC emphasize the critical importance of the funding received from the EPA. It enables the community to protect sovereign rights, fosters the creation of an environmentally safe living environment, and maintains the health and well-being of tribal members. To date, the SRPMIC has received over \$700,000 through the GAP programs since FY2023.

Recommendation: Continue the support for the Indian Environmental GAP program at the existing level.