

April 18, 2025

Robert F. Kennedy, Jr., Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

RE: Proposed Cuts to the Indian Health Service in the Office of Management and Budget Passback for Department of Health and Human Services' Fiscal Year 2026 Discretionary Budget

Dear Secretary Kennedy,

On behalf of the National Council of Urban Indian Health (NCUIH) and the 41 Urban Indian Organizations (UIOs) we serve,<sup>1</sup> we write to express our deep concern regarding proposed sweeping budget cuts outlined in the Office of Management and Budget's (OMB) Department of Health and Human Services (HHS) Fiscal Year (FY) 2026 Discretionary Budget Passback (hereinafter OMB's Passback). OMB's Passback includes significant funding cuts to the Indian Health Service (IHS) and to several HHS operating divisions and programs that the IHS, Tribal, and UIO system (collectively the "I/T/U) rely on. These funding cuts will have a direct impact on the health care delivery for American Indian and Alaska Native people all over the United States. **We urgently request your immediate appeal to the proposed reductions to HHS funding that will have a devastating impact on American Indian and Alaska Native people and the I/T/U facilities that serve them.**

This appeal is necessary to ensure the United States upholds its trust obligations to American Indian and Alaska Native people and communities. Notably, the Indian Health Care Improvement Act (IHCA) affirms this obligation, establishing that "Federal health services to maintain and improve the health of the Indians are consonant with and required by the Federal Government's historical and unique legal relationship with, and resulting responsibility to, the American Indian people."<sup>2</sup> Additionally, it declares: "[I]t is the policy of this Nation, in fulfillment of its special trust responsibilities and legal obligations to Indians -- to ensure the highest possible health status for Indians and urban Indians and to provide all resources necessary to effect that policy."<sup>3</sup> **Not only is OMB's Passback inconsistent with the federal government's trust responsibility, it is also inconsistent with the HHS' Make America Health Again (MAHA) initiative, which aims to improve health outcomes. This effort must begin with adequately funding programs that address health disparities in American Indian and Alaska Native communities.**

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<sup>1</sup> NCUIH serves the 41 Urban Indian Organizations receiving grants from the Indian Health Service pursuant to the Indian Health Care Improvement Act (25 U.S.C. §1651 et seq.).

<sup>2</sup> 25 U.S.C. § 1601(1).

<sup>3</sup> 25 U.S.C. §1601(1).

Among the many drastic cuts in funding, OMB's Passback proposes reducing the IHS budget by nearly \$900 million and ending IHS advance appropriations. As the primary federal agency upholding the United States' obligation to provide for the health of American Indian and Alaska Native people, it is critical that IHS is fully funded to the maximum extent possible. As you know, IHS is a chronically underfunded agency, and any cuts to IHS funding only exacerbate this issue. It is also critically important that IHS funding is protected from funding interruptions such as government shutdowns. During the 35-day government shutdown at the start of FY 2019, UIOs were forced to take drastic measures by laying off staff, slashing hours, reducing services, and even shuttering their doors due to a lack of funding. One UIO had multiple opioid overdoses in their community after they were forced to close their doors, several of which were fatal. Advance appropriations for IHS funding protect against these issues and ensure that I/T/U facilities receive the funding they need to serve their communities.

**We are grateful for your recent visit to Native Health, a UIO located in Arizona, where you saw firsthand, the “innovative work using healthy, locally-sourced, unprocessed foods to combat chronic disease.” Following this visit, you remarked that Native Health is a "model [that] should be replicated and become the standard of care across Indian Country."** We agree and we are proud of the work of Native Health and other UIOs. Funding from IHS and other operating divisions within HHS are key to the success for Native Health and other UIOs in their work to improve the health of the American Indian and Alaska Native people they serve. UIOs use this funding to provide critically needed primary care, behavioral health services, and social and community services to American Indian and Alaska Native people living in urban areas. Unfortunately, OMB's Passback jeopardizes these programs and services.

Another program the OMB Passback proposes eliminating is the Tribal Behavioral Health Grants (also known as Native Connections). Hundreds of American Indian and Alaska Native entities- including nearly half of the 41 UIOs utilize Native Connections to address suicide, substance abuse and trauma, and promote mental health in their youth. If this program is eliminated, as the OMB Passback proposes, Tribes, Tribal organizations, and UIOs will lose the critical, lifesaving funding to provide these services.

The OMB Passback also proposes eliminating the Food is Medicine program. IHS participates in Food Is Medicine through their Produce Prescription Pilot Program (P4). Elimination of this program would be detrimental to Tribes and UIOs who rely on the funding to provide access to traditional foods, fruits, and vegetables. This program was created with the intent of addressing food insecurity and diet-related diseases. Without funding for this program and others within Food Is Medicine, I/T/U facilities will have to look elsewhere to find funding or go without providing these essential resources. Eliminating the Food is Medicine program is not consistent with the MAHA initiative, and it is not consistent with your own words when you said during the February 2025 Secretary Tribal Advisory Committee (STAC) meeting that “Food is medicine.”

While these are just a few examples of the devastating impact on the I/T/U system from the proposed cuts in the OMB Passback, we note that the impacts on several other programs for Indian Country, including programming on HIV/AIDS, diabetes, and preventive health.

**Moreover, we encourage you to follow Secretary Burgum, who – at the urgent request of Tribal Nations – has taken action to appeal the recently proposed \$1.2 billion in cuts to the Bureau of Indian Affairs (BIA) the Bureau of Indian Education (BIE).** Just as these reductions threaten critical services for Tribal communities, the cuts proposed in OMB’s Passback would have devastating consequences for the entire I/T/U system.

**Given your statements on being committed to prioritizing Indian health, we urge you to immediately appeal these harmful proposals that will have devastating effects throughout Indian Country. Your** ongoing support is essential to improving health outcomes and ensuring the I/T/U system has the necessary resources to effectively serve their American Indian and Alaska Native patients and communities. NCUIH and UIOs remain committed to working alongside you and this Administration to fulfill this responsibility and advance the health of Indian Country. Please reach out anytime at [FCrevier@NCUIH.org](mailto:FCrevier@NCUIH.org) or (202) 868-3015.

Sincerely,



Francys Crevier, J.D.  
Chief Executive Officer