

Seattle Indian Health Board



Improving coordination between the
U.S. Department of Health and
Human Services and Urban Indian
Organizations

Seattle Indian Health Board supports rapid passage of H.R. 630/S.460 Urban Indian Health Confer Act which requires the Department of Health and Human Services (HHS) to confer with urban Indian organizations (UIO).*

In response to tribal feedback, we are leading the effort to make amendments to Section 514(a) of the Indian Health Care Improvement Act (25 U.S.C. 1660d) to refine the definition of “confer”. These changes would clarify that “confer” does not mean tribal consultation as that term is solely used to describe the government-to-government consultations between the United States and federally recognized tribes.

What is an urban confer?

An urban confer is not tribal consultation nor does it take the place of tribal consultation. Rather, it encourages HHS and its agencies engage with UIOs when considering the direct impact of policies and programs on American Indian and Alaska Native beneficiaries accessing health care services at facilities in urban areas who are contracted by Indian Health Services.

Why is there an urgent need to expand use of urban confer policies?

An urban confer process can help to address the systemic inequities urban American Indians and Alaska Natives experience within a non-tribal governing jurisdiction. Nationwide, 76% of American Indian and Alaska Native people identify as living within cities. While not all Native people use health care services provided by UIOs, it is important for HHS agencies to talk with, or “confer,” with UIOs to develop mutual understanding of the shared responsibility federal agencies and urban Indian organizations have to serving American Indian and Alaska Native populations.

What is the history of tribal consultation and urban confer policies?

Tribal consultations were created by the federal government to honor trust and treaty responsibilities to tribal nations. Tribal nations hold a distinct government-to-government relationship with the federal government which is the foundation for all tribal consultation policies.

Urban confer policies stem from decades of deliberate federal policy efforts (i.e. relocation, termination, forced assimilation) that have contributed to a significant number of American Indian and Alaska Native people residing in urban cities. Urban confer policies grant UIOs a formal mechanism for engaging with HHS agencies to fulfill responsibilities for American Indians and Alaska Natives.

What are examples of tribal consultation and urban confer policies?

[Indian Health Service \(IHS\)](#) is the only federal agency with an urban confer policy. It is the most comprehensive example for including UIOs in the implementation of the Indian Health Care Improvement Act (IHCIA).

[Washington State Healthcare Authority \(HCA\) Tribal Consultation and Communication Policy](#) establishes a collaborative process between the HCA, tribes, tribal organizations, and UIOs to collaborate on state level health care and public health issues, projects, and innovations.

[Washington State Office of the Insurance Commissioner \(OIC\) Tribal Consultation and Collaborative Process](#) includes tribes and UIOs in the decision-making process prior to development of OIC policies, agreements, programs, and actions impacting Native people.

*The Indian Health Care Improvement Act definition of urban Indian organizations means a nonprofit corporate body situated in an urban center governed by a board of directors of whom at least 51% are American Indians/Alaska Natives, for the purpose of establishing and administering an urban Indian health program and related activities as described in Title V of the Indian Health Care Improvement Act.

If you have any questions, please contact Christina Diego (Member of Colville), Policy Director, at christinad@sihb.org or call 206-856-3334.