



2023 Winter Convention Portland, Oregon

RESOLUTION #2023 – 06

“COMMUNITY HEALTH AIDE PROGRAM CERTIFICATION PROCESS”

PREAMBLE

We, the members of the Affiliated Tribes of Northwest Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants rights secured under Indian Treaties, Executive Orders and benefits to which we are entitled under the laws and constitution of the United States and several states, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise promote the welfare of the Indian people, do hereby establish and submit the following resolution:

WHEREAS, the Affiliated Tribes of Northwest Indians (ATNI) are representatives of and advocates for national, regional, and specific tribal concerns; and

WHEREAS, ATNI is a regional organization comprised of American Indians/Alaska Natives and tribes in the states of Washington, Idaho, Oregon, Montana, Nevada, Northern California, and Alaska; and

WHEREAS, the health, safety, welfare, education, economic and employment opportunity, and preservation of cultural and natural resources are primary goals and objectives of ATNI; and

WHEREAS, American Indian and Alaska Native (AI/AN) communities are disproportionately affected by behavioral health disparities and inadequate access to behavioral health services; and

WHEREAS, the federal government has trust and treaty obligations to provide for the health care of AI/AN people; and

WHEREAS, AI/AN people have very limited access to health care services and are

disproportionately affected by health disparities and these disparities are directly attributed to the lack of health professionals in Indian communities, which has caused a serious access issue and backlog of many health services for Indian people; and

WHEREAS, many ATNI member tribes have great difficulty and face significant challenges in recruiting health professionals to work in their communities that results in further challenges in ensuring continuity; and

WHEREAS, the Alaska Community Health Aide Program (CHAP) has been in existence since 1964 as a program of the Indian Health Service (IHS); and

WHEREAS, in 2010, the Indian Health Care Improvement Act directed the Secretary of the U.S. Department of Health and Human Services to make the CHAP available to tribes nationally; and

WHEREAS, in 2015, the Northwest Portland Area Indian Health Board (NPAIHB) began its Portland IHS Area CHAP expansion and currently operates the Tribal Community Health Provider (TCHP) Program which includes the Dental Health Aide Program (DHA), Behavioral Health Aide Program (BHA), and Community Health Aide Program (CHA); and

WHEREAS, the TCHP, CHA, DHA and BHA Programs (together referred to as TCHP Programs) support CHAP implementation to carry out the coordination for programming, serve as technical advisors and conduct outreach; and

WHEREAS, the TCHP Programs have developed partnerships with tribes and educational programs for Dental Health Aide Therapist (DHAT), DHA, BHA and CHA providers in the Northwest to help build more complete and accessible educational ladders that strengthen the public health infrastructure and capacity at community level by expanding access to CHAP providers in our tribal health organizations; and

WHEREAS, in 2018, IHS formed the CHAP Technical Advisory Group, detailed in [IHS Circular 18-01](#), to provide input and direction on national CHAP expansion; and

WHEREAS, in 2020, IHS established the foundation for national CHAP expansion in [IHS Circular 20-06](#); and

WHEREAS, in 2021, the NPAIHB and IHS, in consultation with Northwest tribes in the Portland IHS Area, established an Area Certification Board, referred to as the Portland Area CHAP Certification Board (PACCB), to provide the federal certification of CHAP providers in Washington, Oregon, and Idaho; and

WHEREAS, Tribal Nations have inherent sovereign authority to administer the collection, ownership, and application of their own data; and

WHEREAS, in 1997, NPAIHB established the Northwest Tribal Epidemiology Center (NWTEC) in an effort to improve the quality of AI/AN data for Northwest tribes in the Portland IHS Area; and

WHEREAS, pursuant to NPAIHB resolution #05-04-04, Tribal Ownership of Data, NPAIHB member tribes retain ownership of data which is collected from members' tribes, and NPAIHB's NWTEC stewards data on behalf of the tribes; and

WHEREAS, an Area Certification Board, through an Area Health Board and its TEC, have the experience, knowledge, expertise, and security systems in place to collect and store personal data on providers seeking CHAP certification; and

WHEREAS, the IHS has identified the management of Area Certification Boards as a contractible but not divisible function; and

WHEREAS, the CHAP provider certification process can be broken into a two-function process instead of one bundled process: the first function is the collection, storage, and archival of personal provider data for the purpose of making a recommendation for CHAP provider certification to the IHS Area Director; and the second function is acceptance of an Area Certification Board's recommendation for CHAP provider certification and issuing that certification; and

WHEREAS, the collection, storage and archival of data related to a provider seeking certification is necessary in order to provide a recommendation for federal certification; and

WHEREAS, according to the Office of Federal Procurement Policy, Office of Management and Budget (OMB) the Policy Letter 11-01 ([76 F.R. 56227](#)): "Performance of Inherently Governmental and Critical Function" Section 3(b)(1), "the term [inherent governmental function] does not normally include - gathering information for or providing advice, opinions, recommendations, or ideas to Federal Government officials;" and

WHEREAS, OMB issued the Policy Letter 11-01 as directed by Congress to create a single definition for the term "inherently governmental function," and establish criteria to identify those functions; and

WHEREAS, the IHS assertion that "inherent governmental function" related to the collection, storage and archival of data for the purpose of making a recommendation for CHAP Certification is a barrier to care and is exacerbating existing access to care issues in the Northwest and across Indian Country for AI/ANs; and

WHEREAS, the ability of Area Health Boards/TECs to readily access aggregated data related to the number of CHAP providers in practice and the IHS/tribal/urban site they are serving will help Area Health Boards better forecast IHS/tribal/urban Indian organization provider needs in their Area and target recruitment efforts; now

THEREFORE, BE IT RESOLVED, that ATNI requests that the Indian Health Service (IHS), including the Administration, U.S. Department of Health and Human Services (HHS) and respective agency leadership:

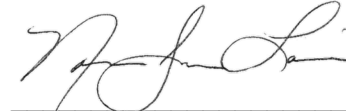
- (1) Divide the Community Health Aide Program (CHAP) provider certification process into two separate functions with the first function specific to the “collection, storage, and archival of personal provider data for the purpose of making a recommendation for CHAP provider certification to the Director of each [respective/participating] IHS Area Office”, and the second function specific to the “acceptance of an Area Certification Board’s recommendation for CHAP provider certification and issuing that certification”; and
- (2) Apply the plain language definition of “inherently governmental function” (set forth in the Office of Federal Procurement Policy, Office of Management and Budget (OMB), Policy Letter 11-01, “Performance of Inherently Governmental and Critical Function,” Section 3(b)(1)) to determine that the “collection, storage, and archival of personal provider data for the purpose of making a recommendation for CHAP provider certification to the Director of each [respective/participating] IHS Area Office”, is not an inherently governmental function; and
- (3) Authorize Area Certification Boards to perform the “collection, storage, and archival of personal provider data for the purpose of making a recommendation for CHAP provider certification to the Director of each [respective/participating] IHS Area Office.”; and

BE IT FINALLY RESOLVED, that the President is hereby authorized and directed to execute this resolution and any documents connected therewith, and the Secretary is authorized and directed to attest to the certification.

CERTIFICATION

The foregoing resolution was adopted at the 2023 Winter Convention of the Affiliated Tribes of Northwest Indians, Portland, Oregon, on January 22-26, 2023 with a quorum approving.


Leonard Forsman, President


Norma Jean Louie, Secretary