



April 1, 2025

The Honorable Robert F. Kennedy Jr.
Secretary of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Secretary Kennedy,

On behalf of the National Indian Health Board and the 574+ federally recognized American Indian and Alaska Native (AI/AN) Tribal Nations we represent, we urgently request a Tribal Consultation regarding the planned restructuring of the Department of Health and Human Services (HHS) and the impact on Tribal Nations. Although Tribes agree with finding efficiency within HHS, reorganization must adhere to the trust and treaty obligations owed to Tribes and their citizens. We request a Tribal Consultation to discuss the Tribal implications and HHS Tribal health programs that are vital to our communities.

The United States has a unique historical, legal, and political relationship with Tribal Nations, established through and confirmed by the Constitution, federal laws, supreme court case law, and presidential orders. Born out of this relationship is the federal government's trust responsibility to protect the interests of Tribes, including the provision of quality healthcare to American Indians and Alaska Natives. In addition, federal agencies have a legal obligation to consult with Tribal Nations on government actions or proposed policies that are likely to impact Tribes. Requirements for Tribal Consultation are detailed in several Executive Orders and in statute.

The proposed reorganization of the Department of Health and Human Services, combined with a considerable reduction in force, would substantially impact Tribes, and therefore requires meaningful Tribal Consultation.¹ For example, departmental restructuring will mean significant changes to various operational divisions' Offices of Tribal Affairs, Tribal Advisory Committees, Tribal set-aside funds, and staffing for Tribal-serving programs. Impacted agencies and operational divisions identified include Substance Abuse and Mental Health Services (SAMHSA), Health Resources Services Administration (HRSA), Administration for Community Living (ACL), Office of the Assistant Secretary for Health (OASH), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), and Centers for Medicare and Medicaid Services (CMS), among others. These agencies manage several Tribal set-aside programs and further programs which Tribal health programs participate in, including

¹ Exec. Order No.13,175, 65 F.R. 218 (2000). <https://www.govinfo.gov/content/pkg/FR-2000-11-09/pdf/00-29003.pdf>



Tribal Opioid Response Grants, Title VI Grants for Services for Native Americans, and the National Health Service Corps' Tribal set-aside.

While these programs have a minimal fiscal impact on the federal government, they are critical lifelines for addressing chronic health conditions that disproportionately harm Indian Country. Without Tribal Consultation and meaningful input from Tribes, a widespread restructuring of HHS is likely to unintentionally impede the effectiveness of these programs and impinge the Government-to-Government relationship between the United States and Tribal Nations. We agree that efficiencies can be achieved, especially in grants administration and funding to Tribal Nations. But without Tribal Consultation and an ongoing engagement process, we will see inadvertent impacts to Tribes like the CDC, NIH, and SAMHSA grants to Tribes which have been cancelled in the last few weeks.

Tribes share the vision for a Healthy America and a more efficient within HHS, but Tribes must be part of those discussions as they impact our direct relationship with HHS programs and the funding for HHS programs meet the federal trust and treaty obligations.

The impacts on Tribal Nations necessitate meaningful Tribal Consultation on the Reorganization and an on-going dialogue as HHS seeks to implement this reorganization to ensure Tribal needs are considered and incorporated into a more efficient HHS. We request a Tribal Consultation to further discuss these urgent concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "W. Smith". The signature is fluid and cursive.

William Smith, *Valdez Native Tribe*
Chairman, National Indian Health Board
National Primary Member At-Large, HHS Secretary's Tribal Advisory Committee